

# **California Department of Corrections and Rehabilitation**

## **Office of Audits and Compliance**




## **Operational Peer Review**

**California Rehabilitation Center**

**February 1 – February 12, 2010**

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# OFFICE OF AUDITS AND COMPLIANCE

## California Rehabilitation Center

### EXECUTIVE SUMMARY

The Office of Audits and Compliance (OAC), in conjunction with various teams, conducted an operational peer review of Business Services, Inmate Appeals, Education, Administrative Segregation (Ad Seg) Bed Utilization, Case Records, [REDACTED], Radio Communications, [REDACTED] and Lethal Electrified Fence at the California Rehabilitation Center (CRC) February 8 through 12, 2010. The purpose of the peer review was to determine CRC's compliance with State, federal, and departmental rules, regulations, policies, and procedures.

This executive summary details the significant issues identified in each of the sections of the Operational Peer Review Report. For more information on the areas of interest, please see the Operational Peer Review Report. The OAC requested that CRC provide a corrective action plan 30-days from the date of their report.

### Business Services

#### **Personnel Operations**

##### **Training**

Seven of the nine personnel transaction staff have not attended the basic courses designed by the State Controller's Office such as Fundamentals of Payroll, Fundamentals of Personnel, Personnel Action Request Documentation, Payroll Input Process and California Leave Accounting System (CLAS).

**Impact:** The lack of these courses may hinder the staff from learning and acquiring the skills and knowledge required to do their job effectively. In addition, this condition may cause errors and a hardship to employees.

##### **Separation of Duties**

The Personnel Specialist who assigned the workload of the Personnel Office is reviewing, recording, and maintaining her own attendance records. Also, the Personnel Specialist certifies, keys, reconciles, and releases her payroll, which includes overtime. Additionally, there is no separation of duty procedures; a post audit of attendance and payroll records are not conducted.

**Impact:** This condition results in late detection of errors, irregularities, and/or misappropriation.

## **Attendance Reporting (Prior Finding)**

Custody supervisors are approving the California Department of Corrections and Employee's Record of Attendance (CDC 998-A) without the appropriate substantiation for military leave, sick leave, and bereavement leave.

**Impact:** This condition results in late detection of inappropriate use of leave and creates additional workload for personnel staff (i.e., making adjustments and corrections).

## **CLAS**

The CLAS does not reflect the accurate time used for those employees in payroll unit 201. For example, the leave credits taken for the month of November 2009 have not been recorded or corrected on the CLAS.

**Impact:** This condition results in late detection of inappropriate use of leave and inaccurate attendance records.

## **Training and Development Assignment (T&D)**

T&D assignments processed for fiscal years 2008/09 and 2009/10 did not have the employee's application attached and adequate processing time was not allowed.

**Impact:** This condition could result in the employee's eligibility for the T&D questioned and by not allowing sufficient processing time the assignment may be delayed.

## **Out-of-Class (OOC) Assignments**

The Audits Branch noted the following deficiencies regarding the OOC assignments:

- OOC assignments are not always appropriately used as an alternative to fill vacancies.
- OOC packages are forwarded to the Warden before the Personnel Office verifies that the information is accurate and complete.
- OOC packages lack pertinent information and an outdated form is used.
- There is no process in place identifying how the Bargaining Unit 6 employees are selected to perform OOC, other than those on the certification list and how Minimum Qualifications are being verified.

**Impact:** These conditions could result in OOC delegation being rescinded, positions being vacant for longer periods of time, and grievances filed from employees.

## **Career Credits**

A review of the Heavy Equipment Mechanic, Correctional Facility history file found that two candidates were awarded career credits. Career credits were not granted in this examination.

**Impact:** This condition could result in candidates receiving scores they are not entitled to and illegal hires made as a result of receiving the three extra credits to their final scores.

## **Control Over Pay Warrants**

Internal controls over the distribution of salary warrants are inadequate and not standardized. Seven of the memorandums randomly sampled did not specify the name of the paymaster who is the person authorized to receive and distribute pay warrants.

**Impact:** This condition could result in late detection of errors, irregularities, theft, and/or misappropriation.

**Inmate Appeals** – The audit resulted in an overall score of 97 percent compliant.

**Education** – The audit resulted in an overall score of 79 percent.

**Academic Education** – A few classrooms have students that have not been administered the Test of Adult Basic Education (TABE) according to the quarterly testing matrix; their last scores are over six months old.

Most teachers do not keep the progress record current. Instead the progress record is only noted upon termination from the class. Only one teacher gives elective credits and records them on the Permanent Record Card, CDCR 154.

There is a master inventory for the test booklets but not for the answer sheets. It is recommended that answer sheets be removed from any classrooms, be inventoried, added to the master inventory, and secured in a locked cabinet.

When students who are transferred to a different class have taken the TABE either in their previous class or by the Testing Coordinator, the sub-test is not being transferred to the new teacher. The new teacher will not get a TABE subtest until the student appears on a matrix list from the previous teacher and is then tested.

**Vocational Education** - The vocational teachers do not issue or record elective credits for students within their programs. The Office Services and Related Technology program teachers have not received Microsoft Certification training and are not participating in the Microsoft Certification process. The teachers were unfamiliar with the performance Profile Sheet used for performance evaluations for each module in the National Center for Construction Education and Research programs.

The TABE subtests diagnostic report was not in the student files in one of the vocational programs. Several classrooms/shops did not have emergency evacuation plans posted.

## **Ad Seq Bed Utilization**

### **Disciplinary**

#### **Hearing to Facility Captain Review**

Time from the date of the Rules Violation Report (RVR) hearing to the date the RVR was audited by the Facility Captain ranged from 1 day to 22 days. Of the cases reviewed, 25 percent met this expectation. On average, the Captain's review of the RVR occurred 14 days after the hearing. Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 5 working days.

#### **Facility Captain to Chief Disciplinary Officer (CDO) Review**

Time from the date the Facility Captain audited the RVR to the date the RVR was audited by the CDO ranged from zero (as in same day as Captain's review) days to seven days. Of the cases reviewed, 63 percent met this expectation. On average, the CDO's review did occur three days after the Captain's review. Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within three working days.

#### **CDO to Institution Classification Committee (ICC) Review**

Time from the date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from 18 days to 51 days. Per the California Code of Regulations, Section 3335(d)(1)(2), upon resolution an ICC shall review the inmate's case within 14 days. Of the cases reviewed, 0 percent met this expectation. Time from the date the CDO audited the RVR to the case being reviewed by ICC averaged 32 days.

### **Incident Report Processing**

Date from incident occurrence to the date Investigative Services Unit (ISU) received the Incident Report ranged from 2 days to 100 days with 43 percent being received by ISU within 21 days. Per the Deputy Director memorandum dated March 26, 2003, the complete incident report package shall be presented to ISU within 21 calendar days.

### **Case Records**

**Holds, Warrants, and Detainers** – The audit reviewed 19 components and 10 areas were not in compliance with current policies and procedures.

In general:

- Staff are not utilizing the resources available.
- Staff need consistent directions for the HWD processing.
- The Automated Release Data Tracking System Data Base needs to be reconciled with the correct information as it is used exclusively for release dates.

- Updated Instructional Memorandums are not being shared with staff or incorporated into their desk procedures.

**Warden's Checkout Order** – Three components were reviewed and they were not in compliance. The following recommendations were made to correct the deficiencies:

- Provide On-the-Job Training for the Correctional Case Records Analyst, Correctional Case Records Supervisor, or any staff responsible for reviewing and signing off the CDC 161, Warden's Checkout Order.
- Provide documented training for staff responsible for entering moves into the Offender Based Information System (OBIS).
- Supervisors conduct periodic reviews on staff who enter data in OBIS, on the CDC Form 112, Chronological History, and care for the Central File

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**Radio Communications** - Overall CRC's Radio Communications was compliant.

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# CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION

## OFFICE OF AUDITS AND COMPLIANCE

### REPORT OF FINDINGS AND RECOMMENDATIONS

#### BUSINESS SERVICES

### CALIFORNIA REHABILITATION CENTER

FEBRUARY 1 THROUGH 19, 2010

CONDUCTED BY  
THE AUDITS BRANCH



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**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CALIFORNIA REHABILITATION CENTER**

**INTRODUCTION**

The California Department of Corrections and Rehabilitation (CDCR), Office of Audits and Compliance (OAC), Audits Branch conducted an audit of Business Services at the California Rehabilitation Center (CRC). The purpose of the audit was to analyze and evaluate the level of compliance with State and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The following areas were audited:

- Personnel Transactions;
- Delegated Testing;
- Payroll/Accounting;
- Procurement;
- Materials Management (i.e., Warehouses and Property);
- Plant Operations;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

The fieldwork was performed during the period of February 1 through 19, 2010. The audit was suspended on February 19, 2010 for budget reasons, and an exit conference was not held for Business Services.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Michael Robinson, Debi Brannon and Naomi Banks conducted the audit. In addition, Scott Steadman, Correctional Plant Supervisor, Avenal State Prison; Teri Terle, Assistant Food Manager, California Correctional Institution; Linda Meske, Personnel Manager, Corcoran State Prison; and Brian Escamilla, Hazardous Materials Specialist, North Kern State Prison provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Dorothy Smith, Correctional Administrator, coordinated and managed the audit. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of the prior reports, test of transactions, interviews, observations, and periodic management briefings. The audit consisted of an entrance conference, review of the prior reports, test of transactions, interviews, observations, and periodic management briefings.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CALIFORNIA REHABILITATION CENTER**

**AUDIT SCOPE**

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of CRC's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions;
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.

## **SYMPTOMS OF CONTROL DEFICIENCIES**

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

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AUDITS BRANCH**

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**CORRECTIVE ACTION PLAN**

CRC's corrective action plan (CAP) is due within 30 days of receipt of the review. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to [Dorothy.Smith@cdcr.ca.gov](mailto:Dorothy.Smith@cdcr.ca.gov) and [Daisy.Sagun@cdcr.ca.gov](mailto:Daisy.Sagun@cdcr.ca.gov). Send the original to Dorothy, OAC, P.O. Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact Dorothy Smith, Correctional Administrator at (916) 255-2717.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CALIFORNIA REHABILITATION CENTER**

**EXECUTIVE SUMMARY**

The Audits Branch conducted an audit of the Business Services Operations at CRC during the period of February 1 through 19, 2010. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures. Prior to this audit the Audits Branch conducted an audit of CRC from December 1 through 19, 2003, January 5 through 9, 2004, and a follow-up audit from May 24 through 28, 2004. Unresolved findings are identified in this report as "Prior Finding."

The audit of Business Services was halted on February 19, 2010 for budget reasons. Therefore an exit conference was not held. The Audits Branch requested that CRC provide a CAP within 30 days of receipt of the review.

**Areas audited:**

- Personnel Transactions;
- Delegated Testing;
- Payroll/Accounting;
- Procurement;
- Materials Management (i.e., Maintenance Warehouses and Property);
- Plant Operations;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

Thirty-five findings are identified in the review, categorized under the following topics:

<b>Category</b>	<b>Number of Findings</b>	<b>Page Number</b>
Administrative Concerns	2	1
Personnel Operations	4	2
Classification and Pay	2	4
Delegated Testing	1	5
Plant Operations	11	6
Environmental Health and Safety	4	14
Inmate Trust Accounting	6	16
Food Services	3	19
Materials Management	2	21
<b>Total</b>	<b>35</b>	

This executive summary provides the category, a brief description of the finding, impact, and prior finding, if applicable.

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Computer Services (67 percent), Fire Department (33 percent), Personnel (28 percent), Procurement (24 percent), Plant Operations (18 percent), Food Services (11 percent) and Accounting (57 percent).

**Impact:** This condition may result in difficulty caring out all the responsibilities of Business Services.

## **I. ADMINISTRATIVE CONCERNS**

### **A. Probationary and Individual Development Plans (IDP)**

IDP and Probationary Reports are not always prepared by supervisors and managers in a timely manner. As of February 2, 2010, there are 473 reports that were outstanding and were due for the period of July 2009 through December 2009.

**Impact:** This condition may result in employees being unaware of their job performance and work expectations.

### **B. Organizational Charts**

Organizational charts are not updated. For example, the organizational chart for the Trust Accounting Office shows the Budget Analyst as the Senior Accounting Officer. Additionally, the organizational chart for Plant Operations has the position numbers displayed as vacant when the position is actually filled. Finally, an employee has the wrong position/classification.

**Impact:** This condition results in difficulty determining the current organizational structure, position number, and employee occupying the position.

## **II. Personnel Operations**

### **A. Training**

Seven of the nine personnel transaction staff have not attended the basic courses designed by the State Controller's Office (SCO) such as Fundamentals of Payroll, Fundamentals of Personnel, Personnel Action Request (PAR) Documentation, Payroll Input Process and California Leave Accounting System (CLAS).

**Impact:** The lack of these courses may hinder the staff from learning and acquiring the skills and knowledge required to do their job effectively. In addition, this condition may cause errors and a hardship to employees.

### **B. Separation of Duties**

The Personnel Specialist who assigned the workload of the Personnel Office is reviewing, recording, and maintaining her own attendance records. Also, the

Personnel Specialist certifies, keys, reconciles, and releases her payroll, which includes overtime. Additionally, there is no separation of duty procedures; a post audit of attendance and payroll records are not conducted.

**Impact:** This condition results in late detection of errors, irregularities, and/or misappropriation.

### **C. Attendance Reporting (Prior Finding)**

Custody supervisors are approving the California Department of Corrections and Employee's Record of Attendance (CDC 998-A) without the appropriate substantiation for military leave, sick leave, and bereavement leave.

**Impact:** This condition results in late detection of inappropriate use of leave and creates additional workload for personnel staff (i.e., making adjustments and corrections).

### **D. CLAS**

The CLAS does not reflect the accurate time used for those employees in payroll unit 201. For example, the leave credits taken for the month of November 2009 have not been recorded or corrected on the CLAS.

**Impact:** This condition results in late detection of inappropriate use of leave and inaccurate attendance records.

## **III. Classification and Pay**

### **A. Training and Development (T&D)**

The Institution processed one T&D assignment for fiscal years 2008/09 and 2009/10. The T&D did not have the employee's application attached and there was not adequate processing time allowed. For example, the T&D must be submitted to the Office of Personnel Services at least 30 days in advance. Instead, it was submitted two weeks prior to the effective date.

**Impact:** This condition could result in questions regarding the employee's eligibility for the T&D. Also, late submission of documents may delay the T&D assignment.

### **B. OOC (Out-of-Class) Assignments**

The Audits Branch noted the following deficiencies regarding the OOC assignments:

- OOC assignments are not always appropriately used as an alternative to fill vacancies.
- OOC packages are forwarded to the Warden before the Personnel Office verifies that the information is accurate and complete.
- OOC packages lack pertinent information and an outdated form is used.
- There is no process in place identifying how the Bargaining Unit (BU) 6 employees are selected to perform OOC assignments, (other than those on the certification list) and how Minimum Qualifications are being verified.

**Impact:** These conditions could result in OOC delegation being rescinded, positions being vacant for longer periods of time, and grievances filed by employees.

#### **IV. Delegated Testing**

##### **A. Career Credits**

A review of the Heavy Equipment Mechanic, Correctional Facility (CF) history file found that two candidates were awarded career credits in an examination. However, career credits were not supposed to be granted in the examination.

**Impact:** This condition could result in candidates receiving scores they are not entitled to and illegal hires made as a result of receiving the three extra credits to their final scores.

#### **V. PLANT OPERATIONS**

##### **A. Safety Meetings (Tailgates)**

Safety meetings are not conducted for each maintenance section at least every 10 days. Of the shops tested, 70 percent did not conduct safety meetings.

**Impact:** This condition implies that Plant Operations has not implemented and maintained an effective Injury Illness Prevention Plan (IIPP).

##### **B. IIPP - Prior Finding**

Staff are not supplied with access to current hazard information related to their work assignments.

**Impact:** This condition could result in duties not being performed in a safe and healthy manner.

##### **C. Fuel Driven Equipment**

Staff and inmates are not receiving training on specific fuel driven equipment such as back hoes, tractors, scissor lifts, boom trucks, trenchers, and other equipment.

**Impact:** This condition could result in duties not being performed in a safe and healthy manner.

##### **D. Confined Space Training (Prior Finding)**

Confined Space training has not been conducted within the past year for staff required to access confined spaces.

**Impact:** The lack of training may expose employees to the risk of death, incapacitation, and impairment of the ability to self-rescue. Additionally, CRC is not assured that the employees have acquired the knowledge, understanding, and skills necessary to perform their job duties.



## **E. Plant Operations Procedure Manual (POPM) – Prior Finding**

The POPM is outdated. For example, the plot plan is incorrect, tool control procedures are incomplete, and the IIPP and Operational Procedures (OP) are outdated.

**Impact:** This condition could result in difficulty training and ensuring that employees are following current policies, practices, and procedures.

## **F. Operational Reporting**

The Plant Operations Maintenance (POM) Report does not accurately reflect the activities of Plant Operations based on the period sampled, June 2009 through December 2009.

**Impact:** This condition results in inaccurate reports provided to management for decision making.

## **G. Emergencies**

Emergency work orders are not always documented when the work order is complete.

**Impact:** This condition gives the appearance that emergencies are not remediated timely.

## **H. General Training**

Mandatory training and On-the-Job Training (OJT) are not always attended and documented based on In-Service Training (IST) documentation. For example, the percentage of attendance for rank and file ranges from 0 to 92 percent and for supervisors 0 to 80 percent.

**Impact:** This condition could result in duties not performed in a safe and healthy manner.

## **I. Cross-Connection Program (Backflow Devices)**

The premise owner or responsible party does not have the backflow prevention devices tested.

**Impact:** This condition makes it difficult determining whether backflow tests are performed.

## **J. Heating, Ventilation and Air Conditioning (HVAC)**

The Preventive Maintenance (PM) on the HVAC is inadequate according to CRC's asset history reports.

**Impact:** This condition may render the PM program ineffective, decrease efficiency, increase downtime, and result in additional repair costs.

## **K. Respiratory Protection Program**

Respiratory training and fit testing were not conducted within the last year. In addition, the Lead and Asbestos Abatement certifications may be in jeopardy due to lack of respiratory protection training.

**Impact:** This condition results in CRC not maintaining an injury and illness free workplace.

## **VI. Environmental Health and Safety**

### **A. Bio-hazardous Waste**

There is no designated waste transporter and staff may not be sufficiently trained.

**Impact:** This could result in staff coming in contact with bio-hazardous substances.

### **B. Hazardous Waste**

The Hazardous Waste Manifest number 002211552FLE has errors and may not have been reported to the California Department of Toxics and Substance Control (DTSC).

**Impact:** This condition could result in the DTSC not aware of the hazardous waste that has been discarded.

### **C. Signage**

There are no signs noting that hazardous materials are stored in the broiler room and accumulation sites.

**Impact:** This could result in staff coming in contact with hazardous substances.

### **D. Inmate Barber**

It is difficult to determine if Inmate Barbers are adequately trained. Of the two files reviewed, one did not contain the required sanitation quiz.

**Impact:** This condition could result in health and safety issues.

## **VII. Inmate Trust Accounting**

### **A. Group Account By-Laws**

Fund raisers are conducted by inmate activity groups without the appropriate by-laws that properly document the type, source of moneys, purpose, persons authorized, use of moneys, etc.

**Impact:** This condition could result in late detection of errors, irregularities, and/or the misuse of group accounts.

## **B. Obligations (Holds)**

Artificial Appliance obligations on inmate funds are not processed in a timely manner. For example, 100 percent of the 19 obligations sampled over 90 days were never released.

**Impact:** This results in additional workload and loss of funds to the State.

## **C. Control Over Pay Warrants**

Seven of the memorandums randomly sampled did not specify the name of the paymaster who is the person authorized to receive and distribute pay warrants.

**Impact:** This condition could result in late detection of errors, irregularities, theft, and/or misappropriation.

## **D. Petty Cash Fund Reconciliation**

Petty Cash Fund Reconciliation is not done on a consistent basis. The \$300 fund was not reconciled quarterly. The petty cash was last reconciled in June 2009. Additionally, the petty cash reconciliation is not signed by a witness/reviewer.

**Impact:** This condition may result in theft, late detection of errors, and irregularities.

## **E. Duty Statements/Desk Procedures**

As of February 4, 2010, staff do not have desk procedures. Staff responsibilities have changed since the November 2008 activation of the new Trust Restitution Accounting Canteen System (TRACS).

**Impact:** This condition could result in employees not fully complying with their current duties and responsibilities.

## **F. Training**

Six of the seven employees working in the accounting office have not received the minimum number of training hours (i.e., 40 hours). The deficient training hours range from 14 hours to 34 ½ hours.

**Impact:** This issue could result in staff not being adequately trained to perform their job duties.

# **VIII. Food Services**

## **A. Food Serving Trays**

The drying rack for food serving trays is not utilized. The food serving trays are stack together promoting bacterial growth.

**Impact:** This condition results in inadequate drying of the food trays which promotes bacterial growth and a potential for the development of food borne illness.

## **B. Training**

Five of the six IST files reviewed for Food Services' employees reveal they have not received sufficient training.

**Impact:** This condition could make it difficult for employees to perform their duties based on current policies, procedures, and practices.

## **C. Main Kitchen**

Floor tiles are broken and walk-in refrigerator floors are not sealed.

**Impact:** This condition could result in injuries to staff and inmates.

# **IX. Materials Management**

## **A. Property**

Property is not tagged in the kitchen, and spot checks of physical property do not reconcile to the Property Control System (PCS)

**Impact:** This condition results in late detection of errors, irregularities, and/or misappropriation.

## **B. Support Warehouse**

The Support Warehouse is not providing Food Services with a current inventory. Food Services receive an inventory about once per quarter instead of weekly. In addition, the stock received reports are not being prepared in a timely manner.

**Impact:** This condition could result in late detection of errors and increases the probability of inaccurate inventory information regarding the Institution's allotted food budget.

## **FINDINGS AND RECOMMENDATIONS**

It should be noted that turnover in the area of Business Services over the past 12 months is as follows: Personnel (28 percent), Procurement (24 percent), Plant Operations (18 percent), Food Services (11 percent), and Accounting (57 percent).

### **I. ADMINISTRATIVE CONCERNS**

#### **A. Probationary and IDPs**

Supervisors do not prepare Probationary Reports and IDPs in a timely manner. As of February 2, 2010, there are 473 reports outstanding that were due for the period of July 2009 through December 2009.

This condition results in employees being unaware of their job performance and of their work expectations.

California Code of Regulations (CCR), Section 599.798, Performance Appraisal, states in part: "... (b) Performance appraisal is a continuing responsibility of all supervisors, and supervisors shall discuss performance informally... shall make an appraisal in writing and shall discuss with the employee overall work performance at least once in each twelve calendar months...."

The Report of Performance for Probationary Employee (Std. 636) states in part: "A probationary period of not less than six months or more than one year is required before permanent civil service status is attained, and reports must be prepared at the end of each one-third portion of the period...."

Personnel Transaction Manual (PTM), Section Agency Responsibility, 900.1, states in part: "... each State agency is responsible for the administration of the performance appraisal program for permanent and probation employees. The success of programs will depend largely on the effectiveness of training provided in the agency for employees, supervisors, and management at all levels. Each agency shall adopt a system of performance appraisals in accordance with the rules of the State Personnel Board."

### **RECOMMENDATION**

Establish a procedure to ensure Probationary Reports and IDPs are completed. In addition, the Personnel Office should include a process that notifies management of delinquent Probationary reports and IDPs and monitor the process for compliance.

## **B. Organizational Charts**

Organizational Charts are not updated. For example, the organizational Chart for Plant Operations has the position numbers displayed as vacant when the position is actually filled. Finally, an employee has the wrong position/classification. Because of this condition, it results in difficulty determining the current organizational structure, position number, and employee occupying the position.

CDCR Memorandum dated December 13, 2007: Organizational Charts, states: "Organizational charts must be signed and dated by executive level management or designee. The positions included should be actual budgeted positions. All positions must show or display full civil service titles. Organizational charts must give an indication of whether the position is vacant or filled. Reporting relationships as well as unit and section names must be displayed."

### **RECOMMENDATION**

Ensure all organizational charts are updated in accordance with CDCR guidelines.

## **II. PERSONNEL OPERATIONS**

### **A. Training**

Seven of nine personnel transaction staff members have not attended the basic courses designed by the SCO. The staff that have not attended consist of two Personnel Supervisors I and five Personnel Specialists. The courses are: Fundamentals of Payroll, Fundamentals of Personnel, PAR Documentation, Payroll Input Process, CLAS Leave Accounting, Employment History Overview, and Corrective Action.

The lack of these courses may hinder the staff from learning and acquiring the skills and knowledge in order to perform their jobs appropriately and effectively. In addition, this condition may cause errors and hardships on employees.

California SCO, Statewide Training, Statewide Training Programs and Prerequisites, Fundamentals of Payroll, Prerequisites, states: "Must have a minimum of five months of personnel/payroll experience and have certified at least Master Payrolls for negative attendance employees that included exceptions to the payroll . . ."

### **Recommendation**

Ensure all employees receive and complete the minimum training requirements and monitor the process for compliance.

## **B. Separation of Duties**

The Personnel Specialist assigned the workload of the Personnel Office is reviewing, recording, and maintaining her attendance records. Also, the Personnel Specialist certifies, keys, reconciles, and releases her payroll, which includes overtime. In addition, there is no separation of duties, procedures, and a post audit of attendance and payroll records is not performed.

This condition could result in the late detection of errors and/or irregularities, and misappropriation.

State Administrative Manual (SAM), Section 20050, states: “. . .the elements of a satisfactory system of internal accounting and administrative controls, shall include, but are not limited to: . . .3. A system of authorization and record keeping procedures adequate to provide effective accounting control over assets, liabilities, revenues and expenditures . . . . These elements, as important as each is in its own right, are expected to be mutually reinforcing and, thus, to provide the system with ‘internal checks and balances’ . . . .”

### **Recommendation**

Establish a procedure that complies with the SAM policy and monitor the process for compliance.

## **C. Attendance Records (Prior Finding)**

Custody supervisors are approving CDC 998-As without the appropriate substantiation for military leave, sick leave, and bereavement leave.

This practice results in late detection of inappropriate use of leave and creates additional workload for personnel staff (i.e., making adjustments and corrections).

Administrative Bulletin (AB) 04-01, Attendance Record Policy – BU 06 and Aligned Non-Represented Employees, states in part: “Supervisor Responsibility – Personnel Post Assignment System (PPAS) and Non – PPAS, The Supervisor will:

- Review the CDC Form 998-A (October 1992) or (August 1999) for accuracy and completeness.
- Determine whether leave credit use is appropriate in accordance with the Memorandum of Understanding (MOU) (R06) or Department of Personnel Administration (DPA) Rules (S06, C06, and M06).
- Sign and date CDC Form 998-A to certify that it is correct and complete . . . .”

### **RECOMMENDATION**

Provided more extensive training to supervisors regarding the processing of CDC 998-A and monitor for compliance.

## **D. CLAS**

The CLAS does not reflect the accurate time used for those employees in the payroll unit 201. For example, the leave credits taken for the month of November 2009 have not been recorded or corrected on the CLAS.

This condition results in late detection of inappropriate use of leave and inaccurate attendance records.

AB 04-01, Attendance Record Policy – BU 06 and Aligned Non-Represented Employees, states: “The Department of Personnel Administration (DPA) Rules, Sections 599.665 and 599.702, Government Code (GC) Section 19849, and the Fair Labor Standards Act (FLSA), Chapter VI, requires all departments to maintain complete and accurate time and attendance records for each employee covered by the FLSA. CDCR’s policy establishes a process and time frame for submitting time and attendance records to the Personnel Office to meet mandated requirements.”

### **RECOMMENDATION**

Establish a review and monitoring process. Provide both formal and informal training, as necessary. Correct leave records to reflect accurate attendance records, and monitor the process for compliance.

## **III. CLASSIFICATION AND PAY**

### **A. T&D**

The Institution processed one T&D assignment for the fiscal years 2008/09 and 2009/10. The T&D did not have the employee’s application attached and there was not adequate processing time allowed. For example, the T&D must be submitted to the Office of Personnel Services at least 30 days in advance; however it was submitted two week prior to the effective date.

This condition could result in the employee’s eligibility for the T&D questioned by not including a copy of the incumbent’s application, STD Form 678. Also, in sufficient processing time may delay the assignment.

POM, Personnel Management Policy and Procedures Manual (PMPPM), Section 340, and Department Operations Manual (DOM), Section 31060.6.5.

### **RECOMMENDATION**

Establish a procedure that details all information required including the timeframes. Also, provide training to all staff that may be involved in the processing of T&Ds.



## **B. OOC**

The Audits Branch noted the following deficiencies regarding the OOCs:

- OOCs are not always appropriately used as an alternative to fill vacancies.
- Managers/Supervisors are not submitting the OOC requests in a timely manner; also, employees are assuming the duties of the OOC prior to approvals.
- OOC packages are forwarded to the Warden before Personnel verifies that the information in the package is accurate and complete. For example, the Staff Services Manager I/Classification and Pay Analyst handwrites additional required information on the OOC after the Warden's approval. Also, documented recruitment efforts are very vague (no dates of advertising, final filing dates, and anticipated interview dates).
- OOC packages lack pertinent information and an outdated form is used. For example, one OOC package failed to disclose that the employee previously worked an OOC in the last 12 months. Additionally, they failed to identify how the employee met the minimum qualifications (MQ).
- There is no process in place identifying how the BU 6 employees are selected to perform OOC, (other than those on the certification list) and how MQ's are verified.
- The OOC Assignment Memorandum to employees documenting completion of the assignment is not processed timely.

These conditions could result in delegation rescinded, positions vacant for longer periods of time, and grievances from employees.

### References:

DPA, Guide to Classification and Pay, Policies and Procedures (C&P Manual) Section 375, MOU for all collective bargaining units, DPA Rule 599.810 OOC Assignments, Excluded Employees, and DPA Personnel Management Liaison (PML) #2005-012.

## **RECOMMENDATION**

Train Managers and Supervisors of their role in regards to documentation and timeline requirements. Also, develop the following documents:

- Flow chart with step by step instructions for completion of OOC
- Checklist of all documents needed for the preparation of the OOC
- Memorandum from Warden noting; the OOC package must be submitted at least ten days prior to the proposed effective date. Also, the OOC duties must not be assigned until the OOC has been approved by the Warden.

## **IV. DELEGATED TESTING**

### **A. Career Credits**

A review of the Heavy Equipment Mechanic (CF), examination history file found that two candidates were awarded career credits in an examination. Career credits were

not supposed to be granted in this examination according to the Departmental Testing Procedures Memorandum (DTPM).

This condition could result in candidates receiving scores they are not entitled to and possible illegal hires because candidates were inappropriately granted three extra credits to their final scores.

CDCR, Delegated Testing Manual (DTM), Section A, Preparation of Examination, specifically Section A13, states in part: “The DTPM provides the Local Testing Officer (LTO) with the testing procedures to administer the examination. It is mandatory that the LTO review each DTPM and become familiar with the DTPM prior to conducting an examination. The DTPM supplements the DTM and provides detailed information for each classification....”

CDCR, DTM, Section A14, is the Examination Information form that is completed by the LTO prior to administration of the examination which details pertinent information for the examination, specifically, whether or not Career Credits are granted in the examination.

### **RECOMMENDATION**

Ensure that the Examination Information form is prepared prior to administering the examination and apply Career Credits when they are applicable to the examination.

## **V. PLANT OPERATIONS**

### **A. Safety Meetings (tailgates)**

Safety meetings (tailgates) are not conducted for each maintenance section, at least every ten days and written minutes taken. Seventy percent (four of six) shops tested did not conduct and document consistent safety meetings.

The condition implies that Plant Operations has not implemented and maintained an effective IIPP.

CCR, Title 8, Article 3, section 8406(e), IIPP, states: “Supervisory personnel shall conduct “toolbox” or “tailgate” safety meetings with their crews at least weekly on the job to emphasize safety. A record of such meetings shall be kept, stating the meeting date, time, place, supervisory personnel present subjects discussed and corrective action taken, if any, and maintained for inspection.”

### **RECOMMENDATION**

Comply, with the CCR Title 8, and conduct safety meetings.

## **B. IIPP (Prior Finding)**

Staff are not supplied with access to current hazard information pertinent to their work assignments. The IIPP binder, inclusive with the Codes of Safe Practices and Hazard Evaluations, have not been reviewed and updated since January 2004.

This condition could result in duties not being performed in a safe and healthy manner.

DOM, Section 31020.3, Objectives, states: "All systems shall meet or exceed the minimum safety and health standards of the General Industry Safety Orders (GISO), CCR, title (8); Manual of Standards for Adult Correctional Institutions (ACA); National Fire Protection Association (NFPA) Life Safety Codes; H&SC; and all other applicable federal, state, and local laws, ordinances, and codes regarding occupational safety, environmental health, and fire prevention and control."

CRC's IIPP, Recording Keeping, states in part: "Local procedures include but are not limited to:

- Codes of safe practices,
- Confined space,
- Electrical hazards,
- Trenching and excavation work,
- Proper use of power tools,
- Personal protective equipment, and
- Hazard communication, etc...."

## **RECOMMENDATION**

Adhere to the DOM and the CRC's IIPP.

## **C. Fuel Driven Equipment**

Staff and inmates are not receiving training on specific fuel driven equipment such as back hoes, tractors, scissor lifts, boom trucks, trenchers, and other equipment such as sewer cleaning machines, welding equipment, and fabrication equipment. This equipment should have specific documented training from the Operation and Maintenance (O&M) manuals. The Audits Branch noted that specific training on equipment is not documented and maintained.

This condition could result in duties not being performed in a safe and healthy manner.

DOM, Section 31020.3, states: "All systems shall meet or exceed the minimum safety and health standards of the General Industry Safety Orders (GISO), CCR, Title (8); Manual of Standards for Adult Correctional Institutions (ACA); National Fire Protection Association (NFPA) Life Safety Codes; H&SC; and all other applicable

federal, state, and local laws, ordinances, and codes regarding occupational safety, environmental health, and fire prevention and control.”

## **RECOMMENDATION**

Adhere to the DOM, and CRC’s IIPP.

### **D. Confined Space Training (Prior Finding)**

Confined Space Training has not been conducted at the CRC’s Plant Operations Department within the last year for 100 percent of Plant Operation’s staff and supervisors who may have to enter a confined space in the course of their assigned duties. The Audits Branch noted confined space locations include: sewer, electric and communication manholes, plumbing chases, and steam closets. Additionally, the Audits Branch noted that the written Confined Space program has not been updated to identify Confined Space locations are required permit spaces.

The lack of training may expose an employee to an atmosphere of risk of death, incapacitation, and impairment of ability to self-rescue. CRC is not assured that those employees have acquired the knowledge, understanding, and skills necessary to perform their job duties.

CCR, Title 8, Article 108 5157(F), states: “Employees must receive training in confined space operations at least once per year . . . .

#### **c) General requirements.**

- 1) The employer shall evaluate the workplace to determine if any spaces are permit-required confined spaces. Note: Proper application of the decision flow chart in Appendix A would facilitate compliance with this requirement.
- 2) If the workplace contains permit spaces, the employer shall inform exposed employees and other employees performing work in the area, by posting danger signs or by any other equally effective means, of the existence, location of and the danger posed by the permit spaces. Note: A sign reading "DANGER -- PERMIT-REQUIRED CONFINED SPACE, DO NOT ENTER" or using other similar language would satisfy the requirement for a sign.
- 3) If the employer decides that its employees and other employees performing work in the area will not enter permit spaces, the employer shall take effective measures to prevent all such employees from entering the permit spaces and shall comply with subsections (c)(1), (c)(2), (c)(6), and (c)(8).
- 4) If the employer decides that its employees will enter permit spaces, the employer shall develop and implement a written permit space program that complies with this section. The written program shall be available for inspection by employees and their authorized representatives.”

## **RECOMMENDATION**

Provide documented training and comply with the general requirements in Industrial Safety Orders. Maintain a formalized written Confined Space Program with documented training.

### **E. POPM (Prior Finding)**

Based on the review of three volumes of the manual, the Audits Branch identified the following discrepancies:

- The plot plans that identify perimeter lighting, automatic sprinklers, towers, gas distribution and the sewer system are inconsistent.
- Tool control procedures are incomplete; they do not contain shop identifiers, shop colors and current attachments for lost tools.
- The IIPP is outdated (2003).
- Section 6 (projects) guidelines are outdated (1998).
- Operational procedure 106 (Red Vest) is outdated
- Operational procedure 125 (work request/work orders) does not have current approved CDCR attachments.

This condition could result in difficulty training and ensuring that employees are following current policies, practices, and procedures.

DOM, Section 12010.1, states: "All divisions, institutions, camps, parole regions, community based correctional centers, and other departmental offices shall be promptly notified of changes in departmental regulations, policy, operational procedures, forms, and other matters of importance."

SAM, Section, 20050, states: "Experience has indicated that the existence of the following danger signal will usually indicate a poorly maintained and vulnerable control system . . . Policy and procedural or operational manuals are either not currently maintained or are non-existent."

## **RECOMMENDATION**

Maintain a current viable POPM.

### **F. Operational Reporting**

The POM report is not used as an effective tool to monitor, evaluate and correct deficiencies timely. During the period sampled, June 2009-December 2009 the following deficiencies occurred:

- Over \$350,000 is spent on Casual Laborers whom activity is not captured.
- The Locksmith, Electronics Technician, and, Pest Control Technicians, and Waste-Water Treatment Operators do not meet the minimum hours for a pay period.

- Priorities are not established correctly. For example, carpenters, groundskeepers, motor pool, and painters are receiving Priority 1 (emergency) work orders. These specific tradesmen's work does not meet the departmental criteria for receiving emergency work orders. It appears the emergency work orders are issued to support overtime.
- The report identifies that the Associate Governmental Program Analyst and Office Technicians receive and complete Priority 1 work orders; however, their duties do not include maintenance.
- The "Open Emergency Work Order" report and the POM report do not reconcile.

This condition may result in inaccurate reports provided to institutional management and the Facilities Management Division Unit Standard Automated Prevention Maintenance System (SAPMS). Additionally, it populates inaccurate data into the Department's Computerized Statistics (COMSTAT) Report.

DOM, Section 11010.12.4.4, states: "The Facilities Management Unit (FMU) is responsible for the development, implementation, administration, support, and compliance reviews of the Standard Automated Preventive Maintenance System (SAPMS) and the maintenance program at all State facilities. The unit is also responsible for developing, administering, and updating the maintenance program section in DOM. The unit shall:

- Conduct on-site operational reviews to provide technical consultation and evaluate compliance with the SAPMS.
- Review and analyze the institutions' database for the inclusion of major systems (electrical, electrified fence, HVAC, personal alarms, water, wastewater, etc.) as defined, but not limited to the Functional Inventory Guide of the SAPMS."

Facilities Management Division (FMD) 0100, Section E, states in part: "Work Order Priorities: Listed below are the departmental definitions of work order priorities:

1. Emergency Maintenance is maintenance requested due to problems that pose an immediate threat to institutional security and/or the health and safety of staff and/or inmates.
2. Preventative Maintenance (PM) is maintenance that is scheduled to be performed on a repeating basis . . .
4. Non-maintenance service requests include services to programs that are not performed on a repeating basis . . .

## **RECOMMENDATION**

Route, validate, and review reports to determine whether they accurately reflect Plant Operations activities.

## **G. Emergencies**

All emergency work is not documented as a completed work order and included in the equipment history within the Facility Center Database. The Audits Branch noted that there were 256 work orders generated during the period June 2009 through December 2009. Of the 256 Priority 1 work orders, 29 (11 percent) remain open.

Additionally, a review of the open Priority 1 Report generated February 9, 2010, indicates that there are 48 outstanding emergency work orders.

This condition gives the appearance that emergencies are not remediated timely.

CRC's OP number 125, dated June 2009, states: "Emergency maintenance is maintenance requested due to problems that pose an immediate threat to institutional security and/or health and safety of staff and/or inmates."

## **RECOMMENDATION**

Complete all emergencies and document by closing the work order within the Facility Center Data base in a timely manner.

### **H. General Training**

Mandatory training and OJT training are not always attended and documented. There are 38 BU 12 and BU 13 rank and file staff and 6 supervisory staff in Plant Operations.

<b>Training Course</b>	<b>Percentage of Rank and File Attendance</b>	<b>Percentage of Supervisors Attendance</b>
Tool and Key Control	92	80
Hazardous Materials	0	0
Inmate Work Training Program	92	80
Injury Illness Prevention Program	16	50
Universal Precautions/Blood Borne Pathogens	83	25

This condition could result in duties not being performed in a safe and healthy manner.

DOM, Section 32010, Training, states: "The process whereby Department employees either individually or in groups participate in a formalized structured course of instruction to acquire skills and knowledge for their current or future job performance. These organized activities shall contain measurable learning objectives that can be evaluated in a classroom setting or in structured OJT.

Job-Required Training, states: Job-required training is designed to assure adequate performance in a current assignment. This includes orientation training made necessary by new assignments or new technology, refresher training, and training mandated by law or other State authority.

Job-Related Training, states: Job-related training is designed to increase job proficiency or improve performance above the acceptable level of competency established for a specific job assignment. It prepares the employee to assume increased responsibilities in their current assignment.

Upward Mobility Training, states in part, Designed to provide career movement opportunity for employees within classifications or job categories designated by the Department as upward mobility classifications. Includes training to facilitate movement of employees from . . . .”

## **RECOMMENDATION**

Conduct and provide documented training in accordance with the DOM.

### **I. Cross-Connection Program (Backflow Devices)**

The premise owner or responsible party does not have the backflow prevention devices tested at the time of installation, repair, or relocation and at least on an annual schedule. The most current test dates are in 2008. Additionally:

- An accurate inventory of backflow devices could not be determined. The Audits Branch received multiple lists, all with different inventory counts (46, 51, and 53).
- The contracted certified tester does not certify results with signature.
- The costs to perform backflow tests are not standardized within the SAPMS.
- The location is not listed on the field test.
- The model number of the backflow device does not reconcile to the model number placed into SAPMS for asset number 130000023055.
- There are 2 asset numbers for 1 backflow device located at the Powerhouse.
- Repairs are not conducted timely when a device fails. It took over 60 days to repair asset number 130000023028 located at L-1.

This condition creates difficulty determining whether backflow tests have been performed.

California Plumbing Code (CPC), Section 603.3.2, states: “The premise owner or responsible party shall have the backflow prevention assembly tested by a certified backflow assembly tester at the time of installation, repair, or relocation and at least on an annual schedule thereafter or more often when required.”

SAPMS guidelines, states: “Establish an effective and efficient (PM) procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment.”

Department of Health Services (DHS) Drinking Water and Environmental Management Division recommend that test results should be kept on file in a central location.

## **RECOMMENDATION**

Create a master list to identify all locations and devices, maintain accurate data within the SAPMS and test backflows on an annual basis. Continuous education of staff should be encouraged.



## J. HVAC

According to the asset history reports, maintenance for HVAC is not in accordance with the CRC's schedule. Additionally the cost to perform preventive maintenance is not standardized.

Building and Location		Maintenance Identification number	Frequency and current PM date (M)monthly,(Q)quarterly(S)semi-annual, (A)annual
E	Administration	130000022599	(Q)-August 2009
458	Medical Infirmary	130000000364	(Q-S-A)-November 2009
442	Dorm 212	130000000613	(Q-S-A)-September 2009
H1	Dorm 407	130000021016	(Q-S-A)-August 2009

This condition may render the PM program ineffective, decrease efficiency, increase downtime and results in additional cost due to repairs.

SAPMS guidelines, states in part: “. . . establish an effective and efficient PM procedure. This procedure must establish the systematic maintenance of all major institutional facilities and equipment. . . . Without such program equipment will wear out prematurely, structures will deteriorate, and efficient function of the facility will be compromised. The Correctional Plant Manager (CPM) shall complete a review, at least monthly . . . This procedure will be reviewed and updated annually.”

## **RECOMMENDATION**

Adhere to the methods of a PM program and perform PM on HVAC in accordance with CRC's established schedule.

## K. Respiratory Protection Program

Proper respiratory training and fit testing were not been conducted at the CRC Plant Operations within the last year. To exacerbate this deficiency the Lead and Asbestos Abatement teams' certifications may be in jeopardy if proper respiratory training and fit testing is not conducted.

This condition results in CRC not maintaining an injury and illness free workplace.

CRC's Section 143, RESPIRATORY PROTECTION PROGRAM, Section V, RESPONSIBILITY, states: “All supervisors are responsible for carrying out the program for employees under their supervision.”

CRC's memorandum dated January 29, 2009, PRESENCE OF ASBESTOS CONTAINING MATERIALS, paragraph 6, states: “Our facility has six employees trained and certified in asbestos abatement . . . .”

ABESTOS AWARENESS MODULE AND QUIZ, Section 6, states in part: “Air monitoring is performed during all abatement projects . . . .”

CCR, Title 8, Subchapter 7, Group 16, Control of Hazardous Substances, Article 107, Dusts, Fumes, Mists, Vapors and Gases, states: “(c) Respiratory protection program. This subsection requires the employer to develop and implement a written respiratory protection program with required worksite-specific procedures and elements for required respirator use. The program must be administered by a suitably trained program administrator. In addition, certain program elements may be required for voluntary use to prevent potential hazards associated with the use of the respirator. The Small Entity Compliance Guide contains criteria for the selection of a program administrator and a sample program that meets the requirements of this subsection.”

### **RECOMMENDATION**

Comply with the CCR and provide respiratory training and fit testing.

## **VI. ENVIRONMENTAL HEALTH AND SAFETY**

### **A. Bio-hazardous Waste**

The Audits Branch noted the following discrepancies of regulated waste (i.e., engineered sharp containers and red bags).

- There is no designated bio-hazardous waste transporter; medical staff hand carry bio-hazardous waste.
- Bio-hazardous (medical waste) training needed on proper movement (internal protocols on transporting).

This condition may place staff in jeopardy of coming in contact with hazardous substances that may transmit diseases.

REGULATED WASTE, states: “4. Medical Waste as defined by Health and Safety Code Chapter 6.1, Sections 117600 - 117800 (see Chapter 9, Appendix, page III, App.1). B. Handling, Storage, Treatment and Disposal of all regulated waste shall be in accordance with Health and Safety Code Chapter 6.1, as referenced above and as described in this Chapter and in Chapter 8, Communicating Hazards and Recordkeeping. It shall also be done in a manner that observes Universal or Standard precautions. C. Disposal of Sharps Containers 1. When moving containers of contaminated sharps from the area of use, the containers shall be: closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport or shipping placed in a secondary container if leakage is possible. The second container shall comply with all provisions listed in 2, below. 2 Contaminated sharps shall be discarded immediately in containers that are able to be closed, puncture resistant, leak-proof, and labeled in accordance- 3.7 - 1/11/02 with the recommendations of the Cal/OSHA BBP Standard (see Chapter 8, Communicating Hazards and Recordkeeping). 3. Reusable containers shall not be opened, emptied or cleaned manually in any manner that might expose employees to the risk of injury.”

## **RECOMMENDATION**

Comply with the Medical Waste Management Act, Sections 117600-118360.

### **B. Hazardous Waste**

Hazardous waste manifest 002211552FLE has errors that may not have been reported to DTSC. The Audits Branch noted there is incorrect or incomplete item numbers from the manifest and a correction letter was not sent to DTSC.

CCR 22, Section 66260, states in part: "A manifest correction letter must be sent to DTSC whenever hazardous waste manifest are submitted containing incorrect or incomplete information. Per the California Health and Safety Code, Section 25160.5 DTSC is authorized to charge a manifest correction fee...."

## **RECOMMENDATION**

Ensure hazardous waste manifests are reviewed for incorrect entries and that a correction letter is completed and sent to DTSC.

### **C. Signage**

There are no signs noting that hazardous materials are stored in the boiler room.

This condition results in an increased threat to life, health, and safety.

CCR Title 8, Section 5194, states in part: "Department heads shall monitor daily compliance with this procedure in the areas of their responsibility . . . . Each area supervisor shall ensure that every person required to work with or use hazardous, toxic, volatile substances is appropriately trained. Maintain a constant daily inventory of all hazardous substances used or stored within the work area."

DOM, Section 52030.4.3, Containers, states in part: ". . . all containers shall be clearly marked to identify the substances contained therein . . . ."

## **RECOMMENDATION**

Comply with CCR, Title 8, and DOM. Post signs where they are needed.

### **D. Inmate Barbers**

The Audits Branch could not determine whether inmate barbers are adequately trained. Of the two files reviewed, one did not contain the required sanitation quiz.

This condition may transmit diseases and place the health of staff and inmates in jeopardy.

CRC OP number 133, states: “All Inmate barbers are required to attend training for the proper use and maintenance of their inmate barber tools as well as health and safety standards. A copy of the inmate Barbers training will be attached to their signed job descriptions.”

### **RECOMMENDATION**

Comply with the OP number 133 and provide documentation of the required training.

## **VII. INMATE TRUST ACCOUNTING**

### **A. Group Account – By-Laws**

Fund raisers are conducted by inmate activity groups without the appropriate by-laws to properly document the type, source of moneys, purpose, persons authorized, use of moneys, etc. Additionally, by-laws names do not match trust names listed in TRACS; five of six by-laws provided did not specify the maximum number of fundraisers allowed; the by-laws provided were also outdated and there are five additional trust funds named “Charity Fund Drive – Yard (1-5)” that do not have any by-laws or documentation specifying the use of the trust fund.

This condition could result in late detection of errors and irregularities and/or the misuse of the accounts.

SAM, Section 19440.1, states, “Each trust account established shall be supported by documentation as to the type of trust, donor or source of trust moneys, purpose of the trust, time constraints, persons authorized to withdraw or expend funds, specimen signatures, reporting requirements, instructions for closing the account, disposition of any unexpended balance, and restrictions on the use of moneys for administrative or overhead costs. This documentation will be retained until the trust is dissolved.”

DOM, Section 101080.1, Charitable Fund Raising Campaigns, states: “Inmates may be authorized annual participation in a maximum of three campaigns for recognized charitable causes per inmate activity group.”

### **RECOMMENDATION**

Ensure by-laws are updated in accordance with SAM and DOM.

### **B. Obligations (Holds)**

Artificial Appliance obligations on inmate funds are not processed in a timely manner. For example, 100 percent of the 19 obligations sampled over 90 days were never released. Additionally, there is no process in place to ensure that obligations are released in a timely manner.

This results in additional workload and loss of funds to the State.

Title 15, Section 3358, states: "If there are insufficient funds for the entire price, a hold should be placed on the balance due. Once a new draw period begins in which the inmate is "wholly without funds," the hold is removed and the balance of the purchase price is written off. See Artificial Appliance Indecency Test."

Inmate Trust Fund Manual states: "All holds that cannot be collected in the 30-day period will be released."

### **RECOMMENDATION**

Ensure all holds on accounts are released timely. Review the Inmate Encumbrances Report frequently to ensure funds are not lost, and are released when appropriate. Even though TRACS is an automated system, there is no way for the system to know when items are received or the obligation is no longer valid. The system must be put into place in order to manually monitor.

### **C. Control Over Pay Warrants**

The Accounting Office receives a combination of different memorandums from departments which identify who will pickup warrants for distribution. Seven of the memorandums randomly sampled did not specify the name of the paymaster who is the person authorized to receive and distribute pay warrants.

This condition could result in late detection of errors, irregularities, theft, and/or misappropriation.

SAM, Section 8580.1, states: "State agencies will observe the following separation of duties in designating persons who can certify or process personnel documents to SCO, Division of Personnel and Payroll Services. Persons designated by agencies to receive salary warrants from SCO, or to distribute salary warrants to employees, or to handle salary warrants for any other purpose will not be authorized to process or sign any of the following personnel documents: d. Absence and Additional Time Worked Report form, STD. 634 (the STD 634 has been replaced by the CDC 998-A). Departments will review duties at least semiannually or more often if necessary to comply with this section."

DOM, Section 311556.1, states; "...the purposes of separation of duties and adequate internal control, pay warrants shall not be disbursed by the person who authorized the disbursement, nor by the person who prepared the warrant."

### **RECOMMENDATION**

Establish a procedure that complies with the SAM and DOM policy and monitor the process for compliance. Ensure that persons designated to receive, distribute or handle salary warrants are not authorized to process or sign personnel documents.

Additionally, establish one form that is used by all departments to identify employees responsible for picking up and distributing warrants.

#### **D. Petty Cash Fund Reconciliation**

Petty Cash Fund Reconciliation is not done on a consistent basis. The \$300 fund was not reconciled quarterly. The petty cash was last reconciled in June 2009. Additionally, the petty cash reconciliation is not signed by a witness/reviewer.

This condition may result in theft, late detection of errors and irregularities.

SAM, Section 8111.2, states: "The custodian will be personally responsible for the amount advanced from the revolving fund. Transfers of custody will be accomplished only after: (a) personal audit of the fund has been made by the employees directly concerned; and (b) a receipt has been given by the newly assigned custodian to the custodian being relieved. A copy of such receipt signed by both parties will be delivered to the Accounting Officer. An employee other than the custodian of the change or petty cash fund will count it in accordance with the following schedule and report the count to the Accounting Officer."

Size of Fund	Frequency of Count
\$200.00 or less	Annually
\$200.01 to \$500.00	Quarterly
\$500.01 to \$2500.00	Monthly
Over \$2500.00	Monthly, if not prescribed more frequently by Fiscal Systems and Consulting Unit, Department of Finance

SAM, Section 7908, Signatures Required on Reconciliations, states: "All reconciliations will show the preparer's name, reviewer's name, date prepared, and date reviewed."

#### **RECOMMENDATION**

Ensure reconciliations are completed and accounted for within the timeframe required.

#### **E. Duty Statements/Desk Procedures**

As of February 4, 2010, staff do not have desk procedures. Staff responsibilities have changed as of November 2008 activation of the TRACS. Additionally, the duty statements provided are not signed and dated.

This condition could result in staff not fully complying with their current duties and responsibilities.

SAM, Section 20050, states in part: “Information must be identified, captured, and communicated in a form and time frame that enable people to carry out their responsibilities.”

### **RECOMMENDATION**

Update duty statements and desk procedures when staff responsibilities change.

#### **F. Training**

Of the 7 employees working in the accounting office, 6 have not received the minimum numbers of training hours (i.e., 40 hours). The deficient training hours range from 14 to 34 ½ hours.

This issue could result in staff not being adequately trained to perform their job duties.

DOM, Section 32010.13, states: “All employees shall receive 40 hours training annually, at least eight hours of which shall be formal classroom training. The balance can be any combination of OJT, formal IST, or out-service training.”

### **RECOMMENDATION**

Ensure all employees receive the minimum training requirements.

## **VIII. FOOD SERVICES**

#### **A. Serving Trays**

The drying rack for food serving trays is not utilized. The food serving trays are stacked together prohibiting drying and promoting bacterial growth.

This condition results in inadequate drying of the food trays which promotes bacterial growth and a potential for the development of food borne illness.

The California Retail Food Code (CRFC), Section 114105, states, “After cleaning and sanitizing, equipment and utensils shall be air dried or used after adequate draining before contact with food and shall not be cloth dried....”

### **RECOMMENDATION**

Ensure drying racks are utilized for drying food trays.

## **B. Training**

Of the six IST training files reviewed, four Food Services' employees indicated they had not received sufficient training.

This condition could make it difficult for employees to perform their duties based on current policies, procedures, and practices.

DOM, Section 32010.13, states: "All employees shall receive 40 hours training annually, at least eight hours of which shall be formal classroom training. The balance can be any combination of OJT, formal IST, or out-service training."

### **RECOMMENDATION**

Ensure all employees receive and complete the minimum training requirements and monitor the process for compliance.

## **C. Main Kitchen**

Floor tiles are broken, walk-in refrigerator floors are not sealed, and most major equipment (i.e., ovens, steam kettles, dish machines, hot boxes, and serving lines) need replacing.

These issues result in unsanitary conditions, possible food contamination, food borne illness, increased risk of vermin, potential for bacteria growth, workplace hazards causing injury to staff and inmates, unacceptable risks, difficulty maintaining adequate temperatures and ensuring food is processed in an efficient manner.

CRFC, Section 114175, states: "Equipment and utensils shall be kept clean, fully operative, and in good repair."

CRFC, Section 114268, states in part: "...the floor surfaces in all areas in which food is prepared, prepackaged, or stored, where any utensil is washed, where refuse or garbage is stored, where janitorial facilities are located...shall be smooth and of durable construction and nonabsorbent material that is easily cleanable...."

### **RECOMMENDATION**

Contact Plant Operations regarding repairs to the floors, perform periodic inspections of food services, document deficiencies and prepare a strategy for resolution which conforms to the overall standards established by the Health and Safety Code, Division 104, Part 7, CRFC, Sections 113700 through 114437.



## **IX. MATERIALS MANAGEMENT**

### **A. Property**

Property is not tagged in the kitchen and spot checks of physical property do not reconcile to the PCS.

This condition could result in late detection of errors, theft, irregularities, and/or misappropriation.

SAM, Section 8650, Accounting and Control of Property, states in part: "Departments will record the following information when property is acquired:

1. Date acquired;
2. Property description;
3. Property identification number;
4. Cost or other basis of valuation;
5. Owner fund; and
6. Rate of depreciation (or depreciation schedule), if applicable.

Departments will keep track of state property, whether capitalized or not, in an automated property accounting system (if one is used) or on Property Record Cards form, STD. 153-A...."

SAM, Section 8651, Identification and Tagging, states in part: "All state property will be tagged after acquisition. This includes properties which do not meet all of the State's capitalization requirements. The purpose of tagging assets is to designate the assets as belonging to the State...."

### **RECOMMENDATION**

Ensure all property is tracked manually or automated. Additionally, ensure property is tagged, and controlled in accordance with the SAM.

### **B. Support Warehouse**

The Support Warehouse is not providing Food Services with a current inventory. Food Services receives an inventory about once per quarter instead of weekly. In addition, the stock received reports are not prepared in a timely manner.

This condition could result in late detection of errors and increases the probability of inaccurate inventory information regarding the Institutions allotted food budget.

The CDCR Food Service Handbook, November 2008 update, page 7-4, states in part: "The food manager is required to maintain accurate, up-to-date financial records, such as food costs, meals served, invoices, purchase orders, inventories, meals served and other pertinent financial information must be maintained..."

DOM, Section 22030.11.5, Stock Received Reports, states in part: “Stock received reports shall be: Prepared at the time goods are received.... Processed immediately and routed to the payments unit for prompt payment of invoices....”

**RECOMMENDATION**

Ensure the Food Manager is provided a current inventory of items for food services and process stock received reports in a timely manner.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CALIFORNIA REHABILITATION CENTER**

**GLOSSARY**

<b>AB</b>	Administration Bulletin
<b>ACA</b>	Adult Correctional Facility
<b>ACI</b>	Adult Correctional Institutions
<b>BU</b>	Bargaining Unit
<b>CAP</b>	Corrective Action Plan
<b>CCR</b>	California Code of Regulations
<b>CDCR</b>	California Department of Corrections and Rehabilitation
<b>CDC 998-A</b>	Employee's Record of Attendance
<b>CF</b>	Correctional Facility
<b>CLAS</b>	California Leave Accounting System
<b>COMSTAT</b>	Computerized Statistics
<b>C&amp;P</b>	Classification and Pay
<b>CPC</b>	California Plumbing Code
<b>CPM</b>	Correctional Plant Manager
<b>CRC</b>	California Rehabilitation Center
<b>DOM</b>	Department Operations Manual
<b>DPA</b>	Department of Personnel Administration
<b>DTM</b>	Delegated Testing Manual
<b>DTPM</b>	Departmental Testing Procedures Memorandum
<b>DTSC</b>	Department of Toxics and Substance Control
<b>FLSA</b>	Fair Labor Standards Act
<b>FMD</b>	Facilities Management Division
<b>FMU</b>	Facilities Management Unit
<b>GC</b>	Government Code
<b>GISO</b>	General Industry Safety Orders
<b>H&amp;SC</b>	Health and Safety Code
<b>HVAC</b>	Heating, Ventilation, and Air Conditioning
<b>IDP</b>	Individual Development Plan
<b>IIPP</b>	Injury Illness Prevention Plan
<b>IMU</b>	Institution Maintenance Unit
<b>IST</b>	In-Service Training
<b>LTO</b>	Local Testing Officer
<b>MOU</b>	Memorandum of Understanding
<b>MQ</b>	Minimum Qualifications
<b>NFPA</b>	National Fire Protection Agency
<b>OAC</b>	Office of Audits and Compliance
<b>OJT</b>	On-the-Job-Training
<b>OOC</b>	Out-of-Class
<b>O&amp;M</b>	Operation and Maintenance Manual

<b>OP</b>	Operational Procedure
<b>PAR</b>	Personnel Action Request
<b>PCS</b>	Property Control System
<b>PM</b>	Preventive Maintenance
<b>PML</b>	Personnel Management Liaison
<b>PMPPM</b>	Personnel Management Policy and Procedures Manual
<b>POM</b>	Personnel Operations Manual
<b>POPM</b>	Plant Operations Procedures Manual
<b>PPAS</b>	Personnel Post Assignment System
<b>PTM</b>	Personnel Transaction Manual
<b>SAM</b>	State Administrative Manual
<b>SAPMS</b>	Standard Automated Prevention Maintenance System
<b>SCO</b>	State Controllers Office
<b>TRACS</b>	Trust Restitution Accounting Canteen System
<b>T&amp;D</b>	Training and Development

SAMPLE FORMAT CORRECTIVE ACTION PLAN				
Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed
A.1	<p><b>WRITTEN NOTICE</b></p> <p>Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.</p>	<p>Facility Captain Do Not use individuals names and do Not use Acronyms.)</p>	<p>A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed.</p> <p>B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense</p>	2/2/2006

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

OPERATIONAL PEER REVIEW

REPORT OF FINDINGS

INFORMATION  
SECURITY

CALIFORNIA REHABILITATION CENTER

FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

INFORMATION SECURITY BRANCH

**Information Security Compliance Review  
California Rehabilitation Center  
February 8-12, 2010**

The Office of Audits and Compliance Information Security Branch (ISB) conducted an Information Security Compliance Review of California Rehabilitation Center (CRC) between the dates of February 8, 2009 and February 12, 2009. The review covered 18 areas. CRC was compliant in 16 areas, partially compliant in 1 area, and noncompliant in 1 area. The overall score is 96 percent. The chart below details these outcomes. Other observations found at the end of this report are also noted.

**FINDINGS SUMMARY:**

		Score	Compliant	Partially Compliant	Non-compliant
<b>STAFF COMPUTING ENVIRONMENT</b>					
1.	Computing Technology Use Agreement (CDC 1857) is on file.	63%			N
2.	Annual Self-Certification of Information Security Awareness and Confidentiality forms are on file.	100%	C		
3.	Information Security Training is current.	100%	C		
4.	Staff can log on using their own password.	100%	C		
5.	Network access authorization is on file.	91%	C		
6.	Physical locations of CPUs agree with inventory records.	100%	C		
7.	Staff CPUs labeled "No Inmate Access."	100%	C		
8.	Staff monitors are not visible to inmates.	100%	C		
9.	Anti virus updates are current.	98%	C		
10.	Security patches are current.	96%	C		

<b>INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)</b>					
11.	Physical location of CPUs agrees to inventory records.	100%	C		
12.	CPU labeled as an inmate computer.	100%	C		
13.	Anti virus updates are current.	100%	C		
14.	Inmate monitors are visible to supervisor.	82%		P	
15.	Portable media is controlled.	100%	C		
16.	Telecommunications access is restricted.	100%	C		
17.	Operating system access is restricted.	100%	C		
18.	Printer access is restricted.	100%	C		

**Test Totals**

<b>16</b>	<b>1</b>	<b>1</b>
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Overall Percentage      96%

**Information Security Compliance Review  
California Rehabilitation Center  
February 8-12, 2010**

**OBJECTIVES, SCOPE, AND METHODOLOGY**

The objectives of the Information Security Compliance Review are to:

- Assess compliance to selected information security requirements.
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department.
- Provide information security training for management and staff.

The ISB did not review any Prison Industry Authority computers.

In conducting the fieldwork, the ISB performs the following:

- Interview members of senior management, information technology (IT) staff, institutional staff, and computer users.
- Ask staff to provide evidence that all authorized computer users have acceptable Use Agreement forms and the appropriate training support documentation on file.
- Test selected information security attributes of users and IT equipment using three different population samples. This includes both staff and inmate computing environments.
- Review various laws, policies, and procedures related to information security in a custody environment.
- Conduct physical inspections of selected computers.
- Observe the activities of the IT support staff.
- Analyze the information gathered through the above processes and formulate conclusions.

**FINDINGS AND RECOMMENDATIONS**

The ISB provided a copy of our review guide to your IT staff. It contains audit criteria and a detailed methodology. That information; therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed on the following pages. ISB staff discussed them with management in an exit conference following our fieldwork. Please contact us if you would like to discuss any of these issues further.



**Information Security Compliance Review  
California Rehabilitation Center  
February 8-12, 2010**

**1. The CDC 1857s are not on file for all computer users. (63 percent compliance)**

Recommendation: Require all staff users to complete CDC Form 1857 before being granted computer access. All contractors, volunteers, or visitors who use California Department of Corrections and Rehabilitation computers are required to complete an Information Access and Security Agreement Form (CDCR-ISO-1900) before being granted access.

(Department Operations Manual (DOM), Sections 48010.8 and 48010.8.2)

Best Practice: All employees must complete CDCR-ISO 1900.

Required forms can be found on the Information Security Office's intranet web site: <http://intranet/ei/information-security/Pages/forms.aspx>.

**2. Inmate computer monitors were not visible to the supervisor. (82 percent compliance)**

Recommendation: The approved uses of workstations by inmates shall be carried out only under very tightly controlled circumstances. Inmates using computers must be under "direct and constant supervision."

(DOM, Section 49020.18.3)

Best Practice: Position all inmate monitors so that the supervisor can easily see all inmate screens.

**Information Security Compliance Review  
California Rehabilitation Center  
February 8-12, 2010**

**OTHER OBSERVATIONS:**

**Observation 1: Critical data, in some areas, is not being backed up.**

Supervisors and managers should communicate with their employees to maintain proper back-up procedures. The IT staff must provide proper back-up media and instruction as needed.

Recommendation: Each department manager or supervisor should identify all data that is critical to their operations, including locally developed databases, and develop back-up and restoration procedures. A back up schedule should be established and enforced.  
(DOM, Section 48010.9.3)

**Observation 2: Several instances of unattended staff user sessions were observed.**

Recommendation: All staff should be reminded of the security policy requiring unattended machines to be secured with a password.  
(DOM, Section 49020.10.5)

Best Practice: Staff should lock computer by using CTL+ALT+DEL and selecting "Lock Computer," or by pressing the Windows Key and L simultaneously.

**Observation 3: There is no Information Security Coordinator (ISC) at the Institution.**

The Warden shall designate an ISC and inform the designee in writing.

Recommendation: Notify the ISC in writing of the assignment and maintain a historical record of all ISC appointees. (DOM, Section 49020.6)

**Observation 4: Inmate clerks are not under "direct and constant supervision" while accessing computers.**

In various locations, inmate clerks were observed to be unsupervised. Monitors were not easily viewable by the inmate supervisor.

Recommendation: Inmates may access workstations for the purpose of completing specific tasks or assignments while under direct and constant supervision. Monitors should be visible at all times (DOM, Section 49020.18.3)

**Information Security Compliance Review  
California Rehabilitation Center  
February 8-12, 2010**

**Observation 5: All computer movement must be approved by the local IT staff.**

Unauthorized equipment moves were observed in the education department. Computer movement without IT staff involvement can lead to inaccurate inventory, improper configurations, and equipment loss.

Recommendation: Maintain accurate inventory records of all computers. Evaluate procedures and resources used to maintain inventory records on all computing assets.

(DOM, Sections 46030.1 and 49010.4)

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

OPERATIONAL PEER REVIEW

REPORT OF FINDINGS

EDUCATION  
COMPLIANCE

CALIFORNIA REHABILITATION CENTER  
FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

EDUCATIONAL COMPLIANCE BRANCH

**EXECUTIVE SUMMARY**  
**OFFICE OF AUDITS AND COMPLIANCE**  
**EDUCATION COMPLIANCE BRANCH REVIEW**

*California Rehabilitation Center*

*February 8-11, 2010*

**TEAM MEMBERS:**

*G. Lynn Hada, Principal, OAC*  
*Beverly Penland, Vocational Vice-Principal, OAC*  
*Valarie Anderson, Academic Vice-Principal, OAC*  
*Tom Posey, Academic Vice-Principal, OCE-IYO*  
*Ron Callison, Vocational Vice-Principal, OCE-VTEA*  
*Mark Lechich, Academic Vice-Principal, OCE-WIA*  
*Sarita Methani, Principal, OCE-EASA, EOP, DDP, DPP*

**242 Areas Reviewed**

CATEGORIES	PERCENTAGE OF COMPLIANCE	
	February 11, 2010 Compliance Review	October 17, 2008 Compliance Review
Education Administration	39 ÷ 43 = 91%	72%
Academic Education	23 ÷ 39 = 59%	73%
Vocational Education	24 ÷ 39 = 62%	43%
Library/Law Library	19 ÷ 28 = 68%	96%
Federal Programs	70 ÷ 76 = 92%	92%
Special Programs*	17 ÷ 17 = 100%	94%
<b>Total:</b>	<b>192 ÷ 242 = 79%</b>	<b>77%</b>

***Your corrective action plan (CAP) must address each of the deficiencies listed below for each category with a score in the table above. The CAP must be submitted to the Superintendent of the Office of Correctional Education for review and/or modification. The CAP then is due to the Office of Audits and Compliance (OAC) for review within 30 days after your receipt of the preliminary report from OAC.***

**I. EDUCATION ADMINISTRATION:**

**91% COMPLIANCE**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**ADMINISTRATION SECTION**

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***Deficiency:***

*#38 Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service Training and On-the-Job Training? Have all currently due probationary and annual performance evaluations been completed? There were five or more annual performance evaluations missing or overdue.*

*#58 Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports? Credits and many of the Test of Adult Basic Education scores are not being recorded on some of the California Department of Corrections and Rehabilitation Form 154s. Some of the files checked were missing one or more quarterly California Department of Corrections and Rehabilitation Form 128Es.*

*#61 Are literacy programs available to at least 60 percent of the eligible prison population? According to the December 2009 Education Monthly Report only 39 percent of the eligible population had literacy programs available.*

*#64 Is the institution utilizing at least two alternate resources to implement literacy services for inmates? The only literacy resources available are through education classes.*

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### ACADEMIC EDUCATION SECTION

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## II. ACADEMIC EDUCATION:

59% COMPLIANCE

### *Deficiency:*

#1 *Are all of the inmate students' job descriptions accurate, complete, signed, and available?* **Several classes have job descriptions that do not reflect the accurate class time schedules, i.e. half-time students have job descriptions showing full-time attendance.**

#2 *Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?* **A few classrooms have students that have not been administered the Test of Adult Basic Education according to the quarterly testing matrix; their last scores are over six months old.**

#3 *Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?* **A few quarterly California Department of Corrections and Rehabilitation Form 128E's were missing for previous quarters within the past year and from the inmate entry date.**

#4 *Is 100 percent of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?* **Most teachers do not keep the progress record current. Instead the progress record is only noted upon termination from the class.**

#7 *Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?* **One teacher does not have enough of the approved Department of Corrections and Rehabilitation curriculum books for the entire class. The teacher exclusively uses a non-approved textbook.**

#8 *Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?* **Only one teacher gives elective credits and records them on the CDCR 154 Permanent Record Card.**

#15 *Does the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?* **One of the new Testing Coordinators does not have an email account. The other Testing Coordinator has not had her password account set-up by the Assistant Information System Analyst (AISA). The Office Assistant left the position and it remains vacant at this time and therefore her account is unavailable. The computer that operates the scanner for running tests has been closed to the Testing Coordinator by the AISA.**

#17 *Are Test of Adult Basic Education testing protocols signed by current staff?* **The signed testing protocols are not on file in the Testing Binder.**

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### ACADEMIC EDUCATION SECTION

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*#19 Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator? There is a master inventory for the test booklets but not for the answer sheets. It is recommended that answer sheets be removed from any classrooms, be inventoried, added to the master inventory and secured in a locked cabinet.*

*#22 Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix? A few students were not tested within ten days of initial entry into the classroom.*

*#27 Are current Test of Adult Basic Education subtests placed in student's file? When students who are transferred to a different class have taken the Test of Adult Basic Education either in their previous class or by the Testing Coordinator, the sub-test is not being transferred to the new teacher. The new teacher will not get a Test of Adult Basic Education subtest until the student appears on a matrix list from the previous teacher and is then tested.*

*#28 Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours? The Independent Study class does not currently have any students.*

*#36 Are teachers testing inmates within 10 days of being enrolled or assigned to Alternative Education Delivery Model program? Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement? A few teachers are not testing inmates within ten days of being assigned.*

*#50 Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan? A few rooms did not have exit signs or evacuation plans posted by the door.*

*#68 Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program? There is a list of some offerings made available to inmates on a monthly basis. They are used as a sign-up for a few sports tournaments. It is recommended that a comprehensive activity schedule that includes all physical sports groups, tournaments, board games and classes for special needs populations including health education classes, be made and posted and/or broadcast to the entire institution.*

*#71 Is California Department of Corrections and Rehabilitation approved State frameworks curriculum being used and are course outlines present? The California Department of Rehabilitation approved State Frameworks are being used; however, there are no course outlines for the classes or presentations that the Physical Education Teacher makes.*



## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### VOCATIONAL EDUCATION SECTION

#### III. VOCATIONAL EDUCATION:

62% COMPLIANCE

#### **Deficiency:**

*#2 Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?* **Several of the student files reviewed did not have a current Test of Adult Basic Education score.**

*#3 Are all of the California Department of Corrections and Rehabilitation 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?* **Several of the student files reviewed did not have a current California Department of Correction and Rehabilitation form 128E chronological report. Teachers reported that students sometimes arrive late to class; however, the corresponding Permanent Class Record does not reflect "S" time was given.**

*#6 Are elective credits in the designated vocational subject being issued to inmates and recorded on the transcript?* **The vocational teachers do not issue or record elective credits for students within their programs.**

*#7 Are Trade/Industry Certifications being issued and recorded to those students earning them?* **The Office Services and Related Technology program teachers have not received Microsoft Certification training. The Automotive programs have lost the ability to give the Automotive Service Excellence test for 5 years; they should be able to re-apply in 2011. They could still do Environmental Protection Agency certification for automotive air conditioner servicing. The textbooks and Automotive Service Excellence books being used in the classes are at least two editions older than the currently published editions.**

*#11 Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?* **A couple of the teachers are not incorporating literacy training for students with less than a 9.0 reading level.**

*#13 Are all of the vocational programs that have a nationally recognized certification programs participating in that program?* **The Office Services and Related Technology program teachers have not received Microsoft Certification training and are not participating in the Microsoft Certification process.**

*#19 Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?* **Not all the record keeping for the National Center for Construction Education and Research are conducted and maintained as outlined in the National Center for Construction Education and Research guidelines.**

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### VOCATIONAL EDUCATION SECTION

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*#25 Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained? The teachers were unfamiliar with the performance Profile Sheet used for performance evaluations for each module in the National Center for Construction Education and Research programs.*

*#28 Are teachers testing within three days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix? Some of the teachers wait until they have several students to test before they administer the Test of Adult Basic Education and do not always test within ten days.*

*#31 Are teachers using pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates? One of the teachers does not review the Test of Adult Basic Education subtests diagnostic report with his student nor review the report for student-needs assessment.*

*#32 Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes? One of the teachers does not use the Test of Adult Basic Education subtests diagnostic report for individualized instruction or to troubleshoot score losses.*

*#33 Are current Test of Adult Basic Education subtests placed in student's file? The Test of Adult Basic Education subtests diagnostic report was not in the student files in one of the vocational programs.*

*#37 Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan? Several classrooms/shops did not have emergency evacuation plans posted.*

*#40 Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly? The teachers are not always able to have Trade Advisory Committee meetings due to the teacher contract and the fact that there are no substitute teachers available to cover their classroom. Additionally, there are budget issues and constraints within the community that make it difficult for members to visit/attend meeting at the institution.*

*#41 Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file? One of the teachers could not find his copy of the Employment Development Department Job Market Analysis.*

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### LIBRARY/LAW LIBRARY SECTION

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#### IV. LIBRARY/LAW LIBRARY:

68% COMPLIANCE

##### **Deficiency:**

*#5 If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?* **The current California Department of Corrections and Rehabilitation Department Operations Manual library supplement does not contain any reference to the use of the libraries by Restricted Housing inmates. However the main library staff is meeting the needs of the Restricted Housing inmates. The Library is open on Saturday for Restricted Housing inmates and the Restricted Housing inmates can make requests to the library which the library staff answers, delivers materials, etc.**

*#7 Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees? If other items are purchased, are they for library use?* **Currently, the library has not had library funds due to budget issues. The library staff stated they were told some money is available and is in the process of placing an order but it is currently not being processed.**

*#8 Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?* **The funds have not been used this year due to budget issues and many of the subscriptions have lapsed.**

*#10 Are all received mandated law books and discs made available to inmates in a timely manner? Are the discs timely loaded on the Law Library Electronic Delivery System computer? Are the law books shelved promptly?* **The law library disks are often not installed in a timely manner by the AISA. The current disk was received the beginning of January and has not yet been installed.**

*#16 Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials?* **The main library does not have the minimum book requirements for the inmate population. The library has not been able to purchase additional books or replace books that are lost, damaged or destroyed due to budget constraints. Library books are often not recovered when an inmate is "rolled up" or transferred to another prison. The Facility IV library, however, does have the minimum requirement of books in the various categories for the number of Facility IV inmates serviced by that library.**

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### LIBRARY/LAW LIBRARY SECTION

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*#18 Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding?* **The libraries have not been able to make purchases due to budget issues. The librarians did indicate they will be processing an order in the near future.**

*#22 Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual? Are all of the Law Library Electronic Delivery System computers up-to-date and operating in each library?* **The library staff was notified that the current Law Library Electronic Delivery System update disk was received the first part of January but has not been installed yet. The library staff stated that the Gilmore v. Lynch law books are up to date.**

*#28 Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes?* **There is little documentation of training that inmate library/law clerks receive. The inmate clerks receive most of the law library and general library processes training verbally. Verbal training is not documented. It is recommended that a training binder or other methods of documentation of all training be maintained.**

*#29 Are personal alarms issued by institution to library staff; does library staff wear alarms; and are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?* **There was no evacuation plan posted in accordance with the institution's emergency evacuation plan.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**FEDERAL GRANTS PROGRAMS SECTION**

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**V. FEDERAL PROGRAMS:**

**92% COMPLIANCE**

**Workforce Investment Act Program:**

***Deficiency:***

*#12 Does each student have a current Test of Adult Basic Education score? If not, does the teacher refer the student for testing? The Test of Adult Basic Education scores are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated. No other teacher was able to operate the software.*

*#14 Are at least 90 percent of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and accountability documents current, accurate and secured? All class records are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated.*

*#15 Are the student files current (incl. Test of Adult Basic Education results and any other assessment scores)? All student files are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated.*

**COMMENTS ON THE WORKFORCE INVESTMENT ACT PROGRAM**

On Thursday, February 4<sup>th</sup>, the AISA removed the administrator rights, changed passwords and the log-on information. Nancy Stucker, academic teacher, Comprehensive Adult Student Assessment System Coordinator cannot run Comprehensive Adult Student Assessment System Reports. The printer default also needs to be reset to the correct printer.

It would be helpfully if the Comprehensive Adult Student Assessment System and Test of Adult Basic Education information could be sent to Headquarters via the Testing Coordinators' computer. This would save time.

**Incarcerated Individuals Program:**

***No Deficiencies Noted in this Program:***

**Vocational Technical Education Act Program:**

***Deficiency:***

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### FEDERAL GRANTS PROGRAMS SECTION

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#9 Are students able to get physical access to the vocational shops over 50 percent of the time? **No, see table:**

Over a two month period				
Prog.	1 <sup>st</sup> month		2 <sup>nd</sup> month	
	X	S	X	S
#1: Auto Mech #1	1208	1139	1116	600
#2: Auto Mech #2	58	135	1562	915
Totals:	1266	1274	2678	1515

#10 Are quarterly meetings held and minutes kept? **No**

Number of Trade Advisory Committee members:

Program #1 0

Program #2 2

Total members: 2

#1 1As per the Interagency Agreement (Exhibit A) has the Vocational Instructor received hands-on training regarding current changes in technology and or certification in their field? **The current teachers' contract does not allow the teachers time off to attend this training.**

#12 As per the Interagency Agreement (Exhibit A) has the Vocational Instructor attended trade specific seminars and or technology conferences related to their field? **The current teachers' contract does not allow the teachers time off to attend these seminars or conferences.**

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### DEVELOPMENTAL DISABILITY PROGRAM SECTION

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#### IV. SPECIAL PROGRAMS\*:

100% COMPLIANCE

#### *Developmental Disability Program*

*No Deficiencies Noted in this Program:*

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**DEVELOPMENTAL DISABILITY PROGRAM SECTION**

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**OVERALL COMPLIANCE RATING: 79%.**

Administrative staff is apprised that the ratings presented are to be considered tentative, and are subject to change pending final review by the Assistant Secretary, Office of Audits and Compliance. Significant changes in ratings will be documented with full explanations and forwarded to the Warden within 15 working days after the conclusion of the Compliance Review.

February 11, 2010

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G. Lynn Hada, Principal

\*        Denotes Developmental Disabilities Program (Clark Remedial Plan) and Physical Disabilities Program (Armstrong)



# DEPARTMENT OF CORRECTIONS AND REHABILITATION



*Education Compliance Branch*

## **COMPLIANCE REVIEW FINDINGS**

### **California Rehabilitation Center**

February 8-11, 2010

#### **ADMINISTRATION**

G. Lynn Hada

#### **ACADEMIC EDUCATION**

Valarie Anderson

#### **VOCATIONAL EDUCATION**

Beverly Penland, Ron Callison

#### **LIBRARY**

Beverly Penland

#### **FEDERAL SUPPLEMENTARY PROGRAMS**

Mark Lechich

Ron Callison

Tom Posey

Sarita Mehtani

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

No.	INSTITUTION: CRC	Yes/No or N/A	COMMENTS
	DATE: February 8-11, 2010		
	COMPLIANCE TEAM: G. Lynn Hada		
1.	<b>Allotments/Operating Expenses:</b> <ul style="list-style-type: none"> <li>Does the Principal maintain a budget tracking system to monitor the school departments' complete budget?</li> <li>Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance?</li> </ul>	Yes	
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	Yes	
3.	Are funds allocated by Office of Correctional Education available and spent within program areas?	Yes	
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by Office of Correctional Education?	Yes	
5.	Are allocated funds for the Bridging Education Programs, including Arts In Corrections (AIC), used to provide program services to inmates?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

6.	Are law library purchases funded by the institution's general budget?	N/A	<p><i>The Superintendent of Correction Education, Office of Correctional Education (OCE), reports that the budget memorandum permanently moving Library to education in 2006 is still valid. There are existing funding problems for the Gilmore Law Library Electronic Data System electronic law book collection as well as other court mandated hard copy law books and supplements.. Furthermore OCE has briefed Secretary Matt Cate. OCE has written a Budget Change Proposal for funding court mandated Law Library expenditures under Program 45. The budget process to date has not resulted in funding the expenditures and the money is being taken from existing adult programs operations funded earmarked for other areas. California Department of Corrections and Rehabilitation (CDCR) Re-Organization resulted in funding discrepancies for the mandated law library books and supplements. The historical continuous funding and allocations for Law Libraries was allocated to adult institutions and funded under the category designated as Program 25. The CDCR Re-Organization resulted in the responsibility for Law Library operations assigned to adult programs but the monies did not come with the new responsibility. The monies for the law libraries were not appropriately transferred to Program 45 operational funds. The funds were absorbed into the institutions operational funds and not transferred to program 45.</i></p>
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# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated February 10, 2009 instructions when filling vacancies?	Yes	
8.	Are the Education Monthly Report (EMR) <del>and the Education Daily Report (EDR)</del> accurate and being completed and submitted on a timely basis?	Yes	
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the Television Specialist?	Yes	
10.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;"><b>Credentials:</b></div> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	Yes	
11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	N/A	Note that Question #10 addresses all credentialed staff. The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
12.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;"><b>Duty Statements:</b></div> Are 100% of the staff duty statements on file and applicable to current position?	Yes	There are staff duty statements for all teachers that are being retained at CRC; some are missing for teachers that are scheduled to leave on March 2, 2010.

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

13.	<div style="border: 1px solid black; padding: 2px;"><b>Operational Procedures:</b></div> <p>Does the institution have an Operational Procedure that addresses the legislative mandates of the Bridging Education Program?</p>	<b>N/A</b>	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
14.	<p>Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?</p>	<b>Yes</b>	
15.	<div style="border: 1px solid black; padding: 2px;"><b>Staff Assignments:</b></div> <p>Does the Principal maintain a current and complete list of all authorized positions and their status?</p>	<b>Yes</b>	
16.	<p>Are all staff appropriately working and/or assigned within the education program?</p>	<b>Yes</b>	
17.	<p>Do all staff within the education program report to, and are under the Principal's supervision?</p>	<b>Yes</b>	
18.	<p>Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?</p>	<b>N/A</b>	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program (BEP)?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
20.	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
21.	Has the Artist Facilitator been officially assigned to the Education Department?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
24.	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25.	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	N/A	The OA promoted as of February 1, 2010.
26.	<div style="border: 1px solid black; padding: 2px;"><b>Alternative Education Delivery Model (AEDM):</b></div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	Yes	
27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure per the Suzan Hubbard memo dated May 5, 2005?	Yes	Union issues stopped complete implementation of Alternative Education Delivery Models in all classes.
28.	Are all Alternative Education Delivery Model positions filled?	Yes	
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	Yes	
31.	<ul style="list-style-type: none"> <li>Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas?</li> <li>Are all approved Alternative Education Delivery Model faculty schedules posted?</li> </ul>	Yes	
32.	<div style="border: 1px solid black; padding: 2px;"><b>Gender Responsive Strategies:</b></div> Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?	N/A	This item applies only to institutions housing females.
33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	N/A	This item applies only to institutions housing females.
34.	<div style="border: 1px solid black; padding: 2px;"><b>Certificates of Completion or Achievement:</b></div> <ul style="list-style-type: none"> <li>Are Certificates of Vocational or Academic Completion being issued to those students earning them and recorded on a tracking system?</li> <li>Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned?</li> </ul>	Yes	
35.	<div style="border: 1px solid black; padding: 2px;"><b>Executive/Supervisory Assignments:</b></div> Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	
37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	Yes	
38.	<ul style="list-style-type: none"> <li>Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service-Training and On-the-Job-Training?</li> <li>Are all probationary and annual performance evaluations currently due completed?</li> </ul>	No	There were five or more annual performance evaluations missing or overdue.



# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

39.	Are supervisors documenting contact with staff and inmates involved in the bridging program?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
40.	Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
41.	<div style="border: 1px solid black; padding: 2px;"><b>Test of Adult Basic Education:</b></div> <ul style="list-style-type: none"> <li>Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card (SPARC)?</li> <li>Is the principal implementing remedial changes to improve the scores?</li> </ul>	Yes	
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes	
44.	<div style="border: 1px solid black; padding: 2px;"><b>Accreditation:</b></div> <p>Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?</p>	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

45.	<ul style="list-style-type: none"> <li>Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner?</li> <li>Is there a leadership team in place and do minutes substantiate regular meetings?</li> </ul>	Yes	
46.	<div style="border: 1px solid black; padding: 2px;"><b>Inmate Enrollment/Attendance:</b></div> <p>Do Academic, Vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?</p>	Yes	
47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	
50.	<div style="border: 1px solid black; padding: 2px;"><b>Bridging Program:</b></div> <p>Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?</p>	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
52.	<b>Transforming Lives Network (TLN):</b> Has the Transforming Lives Network satellite dish been installed and operational?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
53.	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
55.	Has Transforming Lives Network enrollment and completion data been tracked?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
56.	<b>GED Testing/High School Credit:</b> <ul style="list-style-type: none"> <li>Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements?</li> <li>Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates?</li> </ul>	Yes	
57.	<b>Inmate Education Advisory Committee:</b> Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

58.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Education Files</b></div> <ul style="list-style-type: none"> <li>Do all of the quarterly California Department of Corrections and Rehabilitation Form 128E and Form 154 (and/or other official student school transcripts) reports contain current and appropriate information that includes credits earned, course completions, etc.?</li> <li>Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.)</li> <li>Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports?</li> </ul>	<b>No</b>	Credits and many of the Test of Adult Basic Education scores are not being recorded on some of the California Department of Corrections and Rehabilitation Form 154s. Some of the files checked were missing one or more quarterly California Department of Corrections and Rehabilitation Form 128Es.
59.	<ul style="list-style-type: none"> <li>Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) transferred to Central Records when a student leaves education, transfers or paroles?</li> <li>Is there a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154 or High School Transcript) kept in the Education Office files in perpetuity?</li> <li>Are Education Files prepared for all assigned inmates?</li> <li><del>Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and are they then transferred to the General Population receiving institution?</del></li> </ul>	<b>Yes</b>	
60.	If there are any contracted, Office of Correctional Education sponsored or special programs operating at the institution, have the teachers assigned to these programs received special/related training?	<b>Yes</b>	The teacher last attended training in January 2009.
61.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Literacy:</b></div> Are literacy programs available to at least 60% of the eligible prison population?	<b>No</b>	According to the December 2009 Education Monthly Report only 39% of the eligible population had literacy programs available.
62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	No	The only literacy resources available are through education classes.
65.	Is there an established procedure for placing students into any existing Learning Literacy Lab (LLL)? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	Students are assigned by the assignment office.
66.	<div style="border: 1px solid black; padding: 2px;"><b>Developmental Disability Program and Disability Placement Program:</b></div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/Office of Correctional Education policies?</p>	Yes	
67.	<div style="border: 1px solid black; padding: 2px;"><b>ESTELLE/Behavior Modification Programs:</b></div> <p>Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?</p>	N/A	This question applies to Pelican Bay State Prison, Salinas Valley State Prison or High Desert State Prison only.
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	This question applies to Pelican Bay State Prison, Salinas Valley State Prison or High Desert State Prison only.

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

69.	<b>Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:</b> Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
70.	Are all Recidivism and Reduction Strategy (RRS) Assessment positions filled (part of Correctional Offender Management Profiling for Alternative Sanctions)?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
72.	Do all designated assessment staff have an individual Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) log-on code? Is the security of the code maintained?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
74.	<b>Recidivism Reduction Strategies:</b> <ul style="list-style-type: none"> <li>Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)?</li> <li>Are inventories of Recidivism Reduction Strategies equipment maintained and current?</li> </ul>	N/A	There is no longer a tracking requirement by the Office of Correctional Education or the Legislature. The Recidivism Reduction Strategies was a three year operational; funding cycle that ended at the beginning of the 2009/2010 fiscal year and absorbed into the general education operations funding process.

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

75.	<b>Recidivism Reduction Strategies Enhanced Outpatient Program:</b> Are all Enhanced Outpatient Program staff hired and in place?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
76.	Does the Principal (via the Academic Vice-Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with California Department of Corrections and Rehabilitation policy?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
77.	Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
78.	<b>Multi-Agency Re-entry Program (SB 618):</b> Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?	N/A	This question applies only to R. J. Donovan Correctional Facility at Rock Mountain.
79.	Are the four vocational programs referenced in Senate Bill 618 in place at the institution?	N/A	This question applies only to R. J. Donovan Correctional Facility at Rock Mountain.
80.	Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?	N/A	This question applies only to R. J. Donovan Correctional Facility at Rock Mountain.
81.	<b>Vocational-Recidivism Reduction Strategies</b> Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?	N/A	Recidivism Reduction Strategies funding and teacher position tracking is no longer required by the Office of Correctional Education.
82.	Are all Recidivism Reduction Strategies vocational classes at full enrollment?	N/A	Recidivism Reduction Strategies funding and teacher position tracking is no longer required by the Office of Correctional Education.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

NO.	INSTITUTION: CRC DATE: February 8-11, 2010 COMPLIANCE TEAM: Valarie Anderson	Yes/No or N/A	COMMENTS
1.	<b>Student Job Descriptions:</b> Are all of the inmate students' job descriptions accurate, complete, signed, and available?	No	Several classes have job descriptions that do not reflect the accurate class time schedules, i.e. half-time students have job descriptions showing full-time attendance.
2.	<b>Student Records/Achievements:</b> Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?	No	A few classrooms have students that have not been administered the Test of Adult Basic Education according to the quarterly testing matrix; their last scores are over six months old.
3.	Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	No	A few quarterly California Department of Corrections and Rehabilitation Form 128Es were missing for previous quarters within the past year and from the inmate entry date.
4.	Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?	No	Most teachers do not keep the progress record current. Instead the progress record is only noted upon termination from the class.
5.	Do 100% of the Permanent Class Record Cards (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?	Yes	
6.	Are Certificates of Completion or Achievement being issued to those students earning them?	Yes	
7.	<b>Instructional Expectations:</b> Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?	No	One teacher does not have enough of the approved Department of Corrections and Rehabilitation curriculum books for the entire class. The teacher exclusively uses a non-approved textbook.



# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

8.	Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the transcript?	No	Only one teacher gives elective credits and records them on the CDCR 154 Permanent Record Card.
9.	Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?	Yes	
10.	<div style="border: 1px solid black; padding: 2px;"><b>Bridging Education Program Instructional Expectations:</b></div> <p>Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?</p>	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
11.	Are the Test of Adult Basic Education and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
12.	Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) and is it up-to-date and accurate?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	N/A	The Bridging Education Program is being eliminated by the Governor and Legislature agreements on day per day time credit and budget cuts resulting in rehabilitative programs reductions. (SBX3 18) (California Department of Corrections and Rehabilitation Fact Sheet on Adult Rehabilitation Programs Reductions for Fiscal Year 2009-10 State Budget)
14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Test of Adult Basic Education Testing Coordinator:</b></div> Are gain/loss reports (School Progress Assessment Report Card) and the Test of Adult Basic Education sub-test reports reviewed/shared with the education supervisors?	Yes	
15.	Do the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?	No	One of the new Testing Coordinators does not have an email account. The other Testing Coordinator has not had her password account set-up by the Assistant Information System Analyst (AISA). The Office Assistant left the position and it remains vacant at this time and therefore her account is unavailable. The computer that operates the scanner for running tests has been closed to the Testing Coordinator by the AISA.
16.	Does the Test of Adult Basic Education Coordinator have the most recent Test of Adult Basic Education database (within a week)?	Yes	Currently the Testing Coordinators can only obtain and transmit data through the Principal's or the office technician's computers. It is recommended that the Testing Coordinators obtain internet access to complete their required tasks via the internet especially with the increased amount of assessments required under the new education models.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

17.	Are Test of Adult Basic Education testing protocols signed by current staff?	<b>No</b>	The signed testing protocols are not on file in the Testing Binder.
18.	Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?	<b>Yes</b>	
19.	Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?	<b>No</b>	There is a master inventory for the test booklets but not for the answer sheets. It is recommended that answer sheets be removed from any classrooms, be inventoried, added to the master inventory and secured in a locked cabinet.
20.	Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions?	<b>Yes</b>	
21.	Is the Test of Adult Basic Education locator being used when needed to determine which level-appropriate Test of Adult Basic Education test to administer?	<b>Yes</b>	
22.	<div style="border: 1px solid black; padding: 2px;"><b>Teacher-Test of Adult Basic Education Testing</b></div> Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?	<b>No</b>	A few students were not tested within ten days of initial entry into the classroom.
23.	Is the Test of Adult Basic Education administered according to the testing matrix?	<b>Yes</b>	
24.	Is the Test of Adult Basic Education locator being used, when needed, to determine which level-appropriate Test of Adult Basic Education test to administer?	<b>Yes</b>	
25.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

26.	Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?	<b>Yes</b>	
27.	Are current Test of Adult Basic Education subtests placed in student's classroom file?	<b>No</b>	When students who are transferred to a different class have taken the Test of Adult Basic Education (TABE) test either in their previous class or by the Testing Coordinator, the subtest is not being transferred to the new teacher. The new teacher will not get a TABE subtest until the student appears on a matrix list from the previous teacher and is then TABE tested.
28.	<div style="border: 1px solid black; padding: 2px;"><b>Alternative Education Delivery Models:</b></div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	<b>No</b>	The Independent Study class does not currently have any students.
29.	Is the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	<b>N/A</b>	
30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning teacher <del>utilizing Transforming Lives Network and</del> airing educational programs? <del>such as Kentucky Educational TV General Education Development series on a weekly basis?</del>	<b>N/A</b>	
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	
36.	<ul style="list-style-type: none"> <li>Are teachers testing inmates within ten days of being enrolled or assigned to an Alternative Education Delivery Model program?</li> <li>Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement?</li> </ul>	No	A few teachers are not testing inmates within ten days of being assigned.
37.	<ul style="list-style-type: none"> <li>Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated?</li> <li>Is it given to the Vice-Principal and Principal on at least a weekly basis?</li> </ul>	N/A	
38.	Are students' gains being recorded and tracked?	Yes	
39.	<div style="border: 1px solid black; padding: 2px;"><b>Gender Responsive Strategies:</b></div> Do all of the academic life skills classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM) (Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?	N/A	This item applies only to institutions housing females.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

40.	Do all of the academic life skills classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	This item applies only to institutions housing females.
41.	<div style="border: 1px solid black; padding: 2px;"><b>ESTELLE and Behavior Modification Unit programs:</b></div> <p>Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance, and participation that allows a clear overall rating of progress of each student in the Behavior Modification Unit/ESTELLE program?</p>	N/A	This question applies to Pelican Bay State Prison, Salinas Valley State Prison or High Desert State Prison only.
42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	N/A	This question applies to Pelican Bay State Prison, Salinas Valley State Prison or High Desert State Prison only.
43.	<ul style="list-style-type: none"> <li>Do ESTELLE students have access to computers as required in the framework of the program for training?</li> <li>Does the teacher have Test of Adult Basic Education scores on all of the students in the program?</li> </ul>	N/A	This question applies to Pelican Bay State Prison only.
44.	<div style="border: 1px solid black; padding: 2px;"><b>Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:</b></div> <p>Are assessment teachers conducting assessments on eligible inmates as defined by the current Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Operations Manual?</p>	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
45.	Does assessment staff utilize the current standardized Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Tracking Form?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

46.	Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with the confidential document procedure?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
47.	Are assessment interviews conducted in a semi-private environment?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
48.	Is appropriate assistance provided to inmates during participation in the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	N/A	Adult Programs transitioned the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operations from teachers to correctional counselors.
49.	<div style="border: 1px solid black; padding: 2px;"><b>Security and Order:</b></div> Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?	Yes	
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	No	A few rooms did not have exit signs or evacuation plans posted by the door.
51.	<div style="border: 1px solid black; padding: 2px;"><b>Pre-Release</b></div> Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
52.	Do all of the Pre-Release lesson plans contain the objective, handouts, and methods for student evaluation?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
56.	Is the Pre-Release class a full-time program (four days/8.5 hours or five days/6.5 hours)? If no, is there an exemption on file?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
57.	Are all of California Department of Corrections and Rehabilitation Form 128Es (that are used to record all education participation including course completions) and classroom records current and accurate and reflect a full-quota student enrollment?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
59.	Does the Pre-release teacher provide the Office of Correctional Education with monthly Pre-release Program reports on time and maintain copies of those monthly Pre-release program reports?	N/A	The pre-release classes are being discontinued by the California Department of Corrections and Rehabilitation Education Departments statewide.
60.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Recidivism Reduction Strategies Enhanced Outpatient Program:</b> </div> Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.



# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	N/A	The Enhanced Outpatient Program educational component is being eliminated by the latest changes in the education programs.
64.	<div style="border: 1px solid black; padding: 2px;"><b>Transforming Lives Network Program:</b></div> Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transforming Lives Network, institutional television, visual worksheets, etc.?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	N/A	There is currently no contract between any institution and the Transforming Lives Network vendor.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

68.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Recreation/Physical Education (P.E.):</b></div> <p>Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?</p>	<b>No</b>	There is a list of some offerings made available to inmates on a monthly basis. They are used as a sign-up for a few sports tournaments. It is recommended that a comprehensive activity schedule that includes all physical sports groups, tournaments, board games and classes for special needs populations including health education classes, be made and posted and/or broadcast to the entire institution.
69.	Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?	<b>Yes</b>	
70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	<b>Yes</b>	It is recommended that the sign-up sheets include inmate names, California Department of Corrections and Rehabilitation numbers, housing and the date of the activity.
71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	<b>No</b>	The California Department of Rehabilitation approved State Frameworks are being used; however, there are no course outlines for the classes or presentations that the Physical Education Teacher makes.
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	<b>Yes</b>	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	<b>Yes</b>	
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	<b>Yes</b>	
75.	Are time-keeping records (California Department of Corrections and Rehabilitation Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

76.	Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?	<b>Yes</b>	
77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	<b>N/A</b>	There is no longer a tracking requirement by the Office of Correctional Education or the Legislature. The Recidivism Reduction Strategies was a three year operational; funding cycle that ended at the beginning of the 2009/20010 fiscal year and absorbed into the general education operations funding process.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

NO.	<b>INSTITUTION: CRC</b> <b>DATE: February 8-11, 2010</b> <b>COMPLIANCE TEAM: Beverly Penland, Ron Callison</b>	Yes/No or N/A	<b>COMMENTS</b>
1.	<div style="border: 1px solid black; padding: 2px;"><b>Student Job Description:</b></div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	<b>Yes</b>	
2.	<div style="border: 1px solid black; padding: 2px;"><b>Student Records/Achievements:</b></div> <p>Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?</p>	<b>No</b>	Several of the student files reviewed did not have a current Test of Adult Basic Education Test score.
3.	<p>Are all of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	<b>No</b>	Several of the student files reviewed did not have a current California Department of Correction and Rehabilitation form 128E chronological report. Teachers reported that students sometimes arrive late to class; however, the corresponding Permanent Class Record does not reflect "S" time was given.
4.	<p>Is the curriculum recording system in-use, accurate, and current?</p>	<b>Yes</b>	
5.	<p>Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours X-time or 8.5 hours of X-time (on full days) for 4-10 programs?</p>	<b>Yes</b>	"S" time is not accurately reflected on the Permanent Class Record.
6.	<p>Are elective credits in the designated vocational subject being issued to students and recorded on their transcript in the education file?</p>	<b>No</b>	The vocational teachers do not issue or record elective credits for students within their programs.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

7.	Are Trade/Industry Certifications being issued and recorded to those students earning them?	No	The Office Services and Related Technology program teachers have not received Microsoft Certification training. The Automotive programs have lost the ability to give the Automotive Service Excellence test for 5 years; they should be able to re-apply in 2011. They could still do Environmental Protection Agency certification for automotive air conditioner servicing. The textbooks and Automotive Service Excellence books being used in the classes are at least two editions older than the currently published editions.
8.	Are Certificates of Completion or Achievement as appropriate being issued and recorded for those students earning them?	Yes	
9.	<div style="border: 1px solid black; padding: 2px;"><b>Instructional Expectations:</b></div> Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?	Yes	
10.	Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?	Yes	
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	No	A couple of the teachers are not incorporating literacy training for students with less than a 9.0 reading level.
12.	Are Vocational Instructors conducting and documenting at least four hours of approved related formal classroom training each week for all inmate students?	Yes	
13.	Are all of the vocational programs that have a nationally recognized certification programs participating in that program?	No	The Office Services and Related Technology program teachers have not received Microsoft Certification training and are not participating in the Microsoft Certification process.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

14.	<b>Recidivism Reduction Strategies:</b> Are the Recidivism Reduction Strategies programs issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?	N/A	There is no longer a separate tracking requirement by the Office of Correctional Education or the Legislature. The Recidivism Reduction Strategies was a three year operational; funding cycle that ended at the beginning of the 2009/2010 fiscal year and absorbed into the general education operations funding process.
15.	<b>National Center for Construction Education and Research:</b> Are all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?	Yes	
16.	Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?	Yes	
17.	Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?	Yes	
18.	Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?	Yes	
19.	Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?	No	Not all the record keeping for the NCCER are conducted and maintained as outlined in the NCCER guidelines.
20.	Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?	Yes	

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	
24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	No	The teachers were unfamiliar with the performance Profile Sheet used for performance evaluations for each module in the National Center for Construction Education and Research programs.
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to Office of Correctional Education within 60 days?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	
28.	<div style="border: 1px solid black; padding: 2px;"><b>Test of Adult Basic Education Testing</b></div> Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?	No	Some of the teachers wait until they have several students to test before they administer the Test of Adult Basic Education and do not always test within ten days.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

29.	Is the Test of Adult Basic Education administered according to the testing matrix?	Yes	
30.	Is the Test of Adult Basic Education locator being used, when needed, to determine which level appropriate Test of Adult Basic Education test to administer?	Yes	
31.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	No	One of the teachers does not review the Test of Adult Basic Education subtests diagnostic report with his student nor review the report for student-needs assessment.
32.	Are teachers using the Test of Adult Basic Education results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes?	No	One of the teachers does not use the Test of Adult Basic Education subtests diagnostic report for individualized instruction or to troubleshoot score losses.
33.	Are current Test of Adult Basic Education subtests placed in student's file?	No	The Test of Adult Basic Education subtests diagnostic report was not in the student files in one of the vocational programs.
34.	<div style="border: 1px solid black; padding: 2px;"><b>Gender Responsive Strategies:</b></div> Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill & Cabinet, Cable Technician, etc.?	N/A	This item applies only to institutions housing females.
35.	Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	This item applies only to institutions housing females.
36.	<div style="border: 1px solid black; padding: 2px;"><b>Security and Order:</b></div> Are personal alarms issued by the institution to instructors and do they wear a whistle and the personal alarms on their person?	Yes	
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	No	Several classrooms/shops did not have emergency evacuation plans posted.



# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	Yes	
39.	Is at least one hour per month of safety meetings being held and documented?	Yes	
40.	<div><b>Trade Advisory Committee:</b></div> Does the instructor have a documented Trade Advisory Committee that meets at least quarterly?	No	The teachers are not always able to have Trade Advisory Committee meetings due to the teacher contract and the fact that there are no substitute teachers available to cover their classroom. Additionally, there are budget issues and constraints within the community that make it difficult for members to visit/attend meeting at the institution.
41.	<div><b>Job Market Analysis:</b></div> Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	No	One of the teachers could not find his copy of the Employment Development Department Job Market Analysis.
42.	<div><b>Apprenticeship:</b></div> Is there an active Apprenticeship Training Program?	N/A	
43.	If there is an active Apprenticeship Training Program, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	
45.	<div><b>Employee and Community Services Programs.</b></div> If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?	Yes	
46.	If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?	N/A	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

NO.	<b>INSTITUTION: CRC</b> <b>DATE: February 8-11, 2010</b> <b>COMPLIANCE TEAM: Beverly Penland</b>	Yes/No or N/A	COMMENTS
1.	<div style="border: 1px solid black; padding: 2px;"><b>Library Staffing:</b></div> <ul style="list-style-type: none"> <li>Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff?</li> <li>Does the Senior Librarian implement/plan the library program?</li> </ul>	Yes	
2.	<div style="border: 1px solid black; padding: 2px;"><b>Department Operations Manual and Department Operations Manual Supplement:</b></div> <ul style="list-style-type: none"> <li>Is the current Department Operations Manual, Section 101120, available in the main libraries and satellite libraries?</li> <li>Is there a Department Operations Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operations Manual supplement reflect the current, actual local library program?</li> </ul>	Yes	
3.	<div style="border: 1px solid black; padding: 2px;"><b>General Population (GP) Access Hours:</b></div> <ul style="list-style-type: none"> <li>Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours?</li> <li>Do General Population inmates have regular access to non-legal library services?</li> </ul>	Yes	
4.	<div style="border: 1px solid black; padding: 2px;"><b>General Population/Law Library Documentation:</b></div> <ul style="list-style-type: none"> <li>Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use?</li> <li>Is there a list showing inmates who request legal access, and those who received access?</li> </ul>	Yes	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

5.	<b>Restricted Housing Status Inmate Access:</b> <ul style="list-style-type: none"> <li>• If there are Restricted Housing inmates in the institution, is there a Department Operations Manual supplement relating to their use of the library?</li> <li>• Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?</li> </ul>	No	The current California Department of Corrections and Rehabilitation Department Operations Manual library supplement does not contain any reference to the use of the libraries by Restricted Housing inmates. However the main library staff is meeting the needs of the Restricted Housing inmates. The Library is open on Saturday for Restricted Housing inmates and the Restricted Housing inmates can make requests to the library which the library staff answers, delivers materials, etc.
6.	<b>Restricted Housing Status Non-Legal Library Services:</b> Do Restricted Housing inmates receive general library services?	Yes	The Librarian has given recreation books to be used by inmates in the Restricted Housing area. The inmates may also send requests to the main library.
7.	<b>Library Expenditures:</b> <ul style="list-style-type: none"> <li>• Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees?</li> <li>• If other items are purchased, are they for library use?</li> </ul>	No	Currently, the library has not had library funds due to budget issues. The library staff stated they were told some money is available and is in the process of placing an order but it is currently not being processed.
8.	<b>Inmate Welfare Funds (IWF) Expenditure:</b> Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?	No	The funds have not been used this year due to budget issues and many of the subscriptions have lapsed.
9.	<b>Law Library Expenditure:</b> <ul style="list-style-type: none"> <li>• Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room?</li> <li>• Are the Stock Received Reports completed and submitted to the Regional Accounting Office?</li> </ul>	Yes	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

10.	<ul style="list-style-type: none"> <li>Are all received mandated law books and discs made available to inmates in a timely manner?</li> <li>Are the discs timely loaded on the Law Library Electronic Data System computer?</li> <li>Are the law books shelved promptly?</li> </ul>	No	The law library disks are often not installed in a timely manner by the Associate Information Specialist Analyst. The current disk was received the beginning of January and has not yet been installed.
11.	<ul style="list-style-type: none"> <li>Are law library discs checked in by the Associate Information Specialist Analyst?</li> <li>If not, who checks them?</li> </ul>	Yes	
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	Yes	
13.	<div style="border: 1px solid black; padding: 2px;"><b>Library Book Stock - Quality, Part I:</b></div> <ul style="list-style-type: none"> <li>Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five years and one unabridged dictionary (no older than five years?)</li> <li>Does the library program have at least three directories relevant to the questions asked by the population served?</li> </ul>	Yes	
14.	<div style="border: 1px solid black; padding: 2px;"><b>Library Book Stock - Quality, Part II:</b></div> <p>Does each library in the institution have a current world almanac, an atlas that is no more than three years old, an English language dictionary that is no more than five years old, and a Spanish and English dictionary that is no more than ten years old?</p>	Yes	
15.	<div style="border: 1px solid black; padding: 2px;"><b>Library Book Stock - Quality, Part III:</b></div> <ul style="list-style-type: none"> <li>Does each library regularly inspect the physical condition of their books?</li> <li>Does the library program have a book repair procedure?</li> </ul>	Yes	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

16.	<b>Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity:</b>  Does each library in the institution have at least one textbook and two supplemental titles which have copyright dates not more than ten years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (including Spanish language) and Native American materials?	No	The main library does not have the minimum book requirements for the inmate population. The library has not been able to purchase additional books or replace books that are lost, damaged or destroyed due to budget constraints. Library books are often not recovered when an inmate is "rolled up" or transferred to another prison. The Facility IV library, however, does have the minimum requirement of books in the various categories for the number of Facility IV inmates serviced by that library.
17.	<b>Library Book Stock - User Orientation:</b>  <ul style="list-style-type: none"> <li>• Are book collections designed to meet the needs and interests of the inmate population served?</li> <li>• Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box?</li> </ul>	Yes	
18.	<b>Library Book Stock - Quantity: (Department Operations Manual Book Aug)</b>  <ul style="list-style-type: none"> <li>• Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation?</li> <li>• <del>Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding?</del></li> </ul>	No	The libraries have not been able to make purchases due to budget issues. The librarians did indicate they will be processing an order in the near future.
19.	Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?	N/A	There is no longer a separate tracking requirement by the Office of Correctional Education or the Legislature. The Recidivism Reduction Strategies was a three year operational; funding cycle that ended at the beginning of the 2009/2010 fiscal year and absorbed into the general education operations funding process.

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

20.	<b>Book Access:</b> <ul style="list-style-type: none"> <li>Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter?</li> <li>Can inmates request books that are not in the library collection?</li> </ul>	Yes	All the books are listed on a computer system.
21.	<b>Circulation:</b> <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	Yes	
22.	<b>Mandated Law Library/California Code of Regulations, Department Operations Manual</b> <ul style="list-style-type: none"> <li>Are the Gilmore v. Lynch mandated law books up to date?</li> <li>Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish?</li> <li>Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operations Manual?</li> <li>Are all of the Law Library Electronic Data System computers up-to-date and operating in each library?</li> </ul>	No	The library staff was notified that the current Law Library Electronic Delivery System update disk was received the first part of January but has not been installed yet. The library staff stated that the Gilmore v. Lynch law books are up to date.
23.	<b>Law Library - American Disability Act (ADA):</b> <p>Are American Disability Act mandatory postings present in the library?</p>	Yes	
24.	<b>Circulating Law Library:</b> <p>Is a procedure for accessing the Circulating Law Library in place?</p>	Yes	
25.	<b>Court Deadlines:</b> <p>Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?</p>	Yes	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

26.	<b>Law Library Forms and Supplies:</b> Do inmates have access to court-required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	
27.	<b>General Library Forms and Supplies:</b> Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	Yes	
28.	<b>Inmate Clerk Training:</b> <ul style="list-style-type: none"> <li>Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee?</li> <li>Do inmate clerks receive training on a regular basis in law library and general library processes?</li> </ul>	No	There is little documentation of training that inmate library/law clerks receive. The inmate clerks receive most of the law library and general library processes training verbally. Verbal training is not documented. It is recommended that a training binder or other methods of documentation of all training be maintained.
29.	<b>Security and Order:</b> <ul style="list-style-type: none"> <li>Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms?</li> <li>Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?</li> </ul>	No	There was no evacuation plan posted in accordance with the institution's emergency evacuation plan.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	<b>INSTITUTION: CRC</b> <b>DATE: February 8-11, 2010</b> <b>COMPLIANCE TEAM: Mark Lechich</b>	<b>Yes/No or N/A</b>	<b>COMMENTS</b>
1.	<div> <b>Duty Statement/Job Description/Credentials – Literacy Learning Lab</b> </div> <p>Does the teacher have a current duty statement on file (within one year)?</p>	<b>Yes</b>	Mr. DeMarco is doing an excellent job with the Literacy Learning Lab (LLL) at CRC.
2.	Does the teacher have a valid credential on file?	<b>Yes</b>	It is located in the Education Office.
3.	<div> <b>Security/Order – Literacy Learning Lab</b> </div> <p>Are personal alarms issued by the institution to teaching staff and do they wear a whistle the personal alarms on their person?</p>	<b>Yes</b>	
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	<b>Yes</b>	The exit sign is located over the door. The emergency evacuation plan is next to the door.
5.	<div> <b>Supervisory/Support – Literacy Learning Lab</b> </div> <p>Does the teacher receive support from his/her supervisor and other educational staff?</p>	<b>Yes</b>	The teacher has good support from supervisor and he works well with his colleagues.
6.	Does the Vice Principal visit/observe the class? Does the Principal visit/observe the class? Does the teacher maintain a sign-in log?	<b>Yes</b>	Mr. Bryson is very supportive and Mr. Weaver also visits the Literacy Learning Lab. A sign-in log sheet is maintained.
7.	<div> <b>Inmate Enrollment – Literacy Learning Lab</b> </div> <p>Does the teacher maintain a minimum enrollment of 27 students?</p>	<b>Yes</b>	There are 27 students are assigned to the Literacy Learning Lab.



# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

8.	Do students receive direct/group instruction?	<b>Yes</b>	Mr. DeMarco gives group instruction to both small and large groups.
9.	Is the Literacy Learning Lab a “self contained” program?	<b>Yes</b>	
10.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Student Records/Testing Achievements – Literacy Learning Lab</b> </div> Does the teacher verify non-General Education Development or non-High School graduation of the student?	<b>Yes</b>	Mr. DeMarco has done a wonderful job in the Literacy Learning Lab. Over the last year he has operated the program, 12 students have received their General Education Development certificate.
11.	Does the teacher start a student record file upon the student entering the Literacy Learning Lab program?	<b>Yes</b>	
12.	Does each student have a current Test of Adult Basic Education score? <i><b>If not, does the teacher refer the student for testing?</b></i>	<b>No</b>	The Test of Adult Basic Education scores are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated. No other teacher was able to operate the software.
13.	Does the teacher assess student’s basic skill level? <i><b>Describe</b></i>	<b>Yes</b>	Mr. DeMarco uses Test of Adult Basic Education and Comprehensive Adult Student Assessment System scores to assess new students. He starts new students with Essential Reading.
14.	Are at least 90% of the California Department of Corrections and Rehabilitation Form 128E chronological reports, classroom records and accountability documents current, accurate and 100% of them secured?	<b>No</b>	All class records are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated.
15.	Are the student files current (incl. Test of Adult Basic Education scores and any other assessment scores)? <i><b>Review</b></i>	<b>No</b>	All student files are not current. Mr. DeMarco has been absent due to illness and surgery. The class was closed for three months. He is currently working on getting them updated.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

16.	Is there a current Student Job Description on file?	<b>Yes</b>	The Student Job Description is included in file.
17.	<div> <b>Instructional Expectations – Literacy Learning Lab</b> </div> <p>Does the teacher use the approved California Department of Corrections and Rehabilitation Competency Based Adult Basic Education curriculum?</p>	<b>Yes</b>	
18.	Are differentiated instructional methods used? <b>Describe</b>	<b>Yes</b>	Mr. DeMarco does a lot of individualized teaching.
19.	Do students track their own progress?	<b>Yes</b>	Software programs track progress.
20.	Do the students receive computer orientation? Is there continuous training? <b>Describe</b>	<b>Yes</b>	The teacher and/or the clerks give new students computer orientation. Continuous orientation is provided if necessary.
21.	Does the teacher maintain course outlines and lesson plans? <b>Review files</b>	<b>Yes</b>	Course outlines and lessons are used to enhance students learning experience.
22.	Does the teacher use alternative assessment instruments (besides the required Test of Adult Basic Education), to determine a student's instructional plan? <b>Describe</b>	<b>Yes</b>	Mr. DeMarco uses PLATO generated tests for assessment.
23.	Do students spend an average of six months of instructional time enrolled in the program?	<b>Yes</b>	The teacher is very successful for obtaining General Education Development certificates.
24.	<div> <b>Other Services – Literacy Learning Lab</b> </div> <p>Does the teacher refer students to other services, i.e. medical? <b>Describe the process</b></p>	<b>Yes</b>	The teacher contacts the Education Officer and or calls Medical himself.
25.	Does the teacher provide the students career-related information?	<b>Yes</b>	PLATO software provides students information.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

### Workforce Investment Act (WIA)

26.	Does the teacher have student aides? If so, how many and how are they used?	<b>Yes</b>	He is assigned two clerks. They assist students with training and provide clerical support.
27.	<div><b>Training – Literacy Learning Lab</b></div> <p>Has the teacher participated in conferences, workshops and seminars from July 1, 2008–June 30, 2009? If so, provide a list.</p>	<b>Yes</b>	The training was provided by Mark Lechich (CDCR) and Andra Digre with PLATO. April – 2009.
28.	<div><b>Expenses – Literacy Learning Lab</b></div> <p>Are spending levels appropriate for material purchases and training to support program needs?</p>	<b>Yes</b>	
29.	<div><b>Equipment – Literacy Learning Lab</b></div> <p>Does the teacher maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? <b>Conduct an inventory</b></p>	<b>Yes</b>	The Inventory Form is complete and Workforce Investment Act tags are located on equipment.
30.	Is the teacher's software appropriately maintained by PLATO's technical field staff? Does the teacher have all three educational software programs (PLATO, Reading Horizons, and Reading Plus) presently in service for his/her students?	<b>Yes</b>	
31.	Does the teacher register all new software purchases with the Associate Information Systems Analyst?	<b>Yes</b>	
32.	<div><b>Committees/Meetings – Literacy Learning Lab</b></div> <p>How often does the teacher meet with the referral teacher for consultation on a student?</p>	<b>Yes</b>	The teacher meets with the referral teacher whenever it is necessary.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

### Workforce Investment Act (WIA)

33.	<b>CASAS/TOPSprou Management Information System (MIS) Coordinator</b> Has the teacher been trained in the area of California Accountability and the TOPSprou Management Information System to appropriately perform his duties as a Comprehensive Adult Student Assessment System Coordinator? <b><i>Dates of last trainings.</i></b>	<b>Yes</b>	Ms. Stucker attended the trainings in March, April, October, in 2009 and she also attended training in January, 2010.
34.	Does the teacher have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? <b><i>Explain the CASAS testing procedures at your institution.</i></b>	<b>Yes</b>	CRC checks out testing materials to teachers maintaining a sign-out and sign-in log for all testing materials. The Comprehensive Adult Student Assessment System Coordinator signs off on testing materials.
35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	<b>Yes</b>	All books are inventoried and secured in storage closet inside of locked Testing Office.
36.	Is the teacher using the latest version of the TOPSprou Management Information System software?	<b>Yes</b>	TOPSprou 5.0 Build 64.
37.	Is the hardware equipment (Scantron machine) and software (TOPSprou Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	<b>Yes</b>	Both of the computers work well but the scanner 2400 needs service. A new scanner has been ordered.
38.	Does the teacher provide each regular teacher with a Student Performance by Competency Report to assist them in preparing lesson plans?	<b>Yes</b>	The coordinator provides both the Student Performance Reports, and the Students Performance by Class Reports.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

### Workforce Investment Act (WIA)

39.	Does the teacher know how to generate the California Payment Point Report? Can the teacher generate a Preliminary Payment Point Report?	<b>Yes</b>	Coordinator checks report after all scanning sessions. Payment Point (PP) by totals is shared with all the staff members. Preliminary PP Reports show total PP if data has not been completely cleaned. Coordinator uses the information to clean-up data.
40	Are the appropriate students receiving and completing the Core Performance Surveys? <b><i>Explain the process in place to ensure that students are receiving the surveys.</i></b>	<b>Yes</b>	Ms. Stucker checks to see if ex-student is still at CRC. If the person is still at the institution they locate him and deliver the survey to him for completion.
41.	Can the teacher generate an up-to-date list of students that will be receiving the Core Performance Survey for the past quarter?	<b>Yes</b>	When the Coordinator runs the Core Performance Survey TOPSpro it showed "No Student Qualified" message for the first quarter.
42.	Can the teacher generate a Data Integrity site review?	<b>Yes</b>	This report is utilized for cleaning data.
43.	Can the teacher generate a Student Gains by Class Report? Can the teacher produce five student Entry/Update records and Pre/Post Test records? (Check reports with Student Gains by Class Report and Student Lister. Dates, testing books, and scores should match between records)	<b>Yes</b>	The Coordinators generated the Student Gains by Class Report. All test records are filed and saved in the Testing Office. All dates, learning gains matched.

### COMMENTS ABOUT WORKFORCE INVESTMENT ACT SECTION

On Thursday, February 4<sup>th</sup> the Associate Information Specialist Analyst removed the administrator rights, changed passwords and the log-on information. Nancy Stucker, academic teacher and Comprehensive Adult Student Assessment System Coordinator cannot run Comprehensive Adult Student Assessment System Reports. The printer default also needs to be reset to the correct printer.

It would be helpfully if the Comprehensive Adult Student Assessment System and Test of Adult Basic Education information could be sent to Headquarters via the Testing Coordinators' computer. This would save time.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Carl D. Perkins Act  
Vocational and Technical Education Act Grant

No.	INSTITUTION: CRC DATE: February 8-11, 2010 COMPLIANCE TEAM: Ron Callison	Yes/No or N/A	COMMENTS														
1.	<div>Inmate Enrollment</div> <p>Is the class meeting the Office of Correctional Education required enrollment quota? (Note the actual enrollment in the comments section).</p>	Yes	<table><tr><th>Program</th><th>Quota</th><th>Enrolled</th></tr><tr><td>1. Auto Mec#1</td><td>27</td><td>26</td></tr><tr><td>2. Auto Mec#2</td><td>27</td><td>27</td></tr><tr><td>3.</td><td></td><td></td></tr></table>			Program	Quota	Enrolled	1. Auto Mec#1	27	26	2. Auto Mec#2	27	27	3.		
Program	Quota	Enrolled															
1. Auto Mec#1	27	26															
2. Auto Mec#2	27	27															
3.																	
2.	<div>Equipment Inventory</div> <p>Is the Vocational and Technical Education Act equipment properly tagged? (Note the condition of equipment in the comments section).</p>	Yes	Condition of equipment:														
3.	Is Vocational and Technical Education Act equipment used for the intended purpose?	Yes															
4.	<div>Student Records/Testing Achievements</div> <p>Are course completions being issued for Office of Correctional Education program training requirements? ▪ How many students are trained per year? (Note the number of students trained per year in the comments section).</p>	Yes	Number of students trained per yr. Program #1: 60 #2: 40 Total: 100														
5.	Do student files verify equipment training on California Department of Corrections and Rehabilitation Form 128E?	Yes															
6.	Is the Office of Correctional Education-approved curriculum and recording system in use?	Yes															
7.	Are lesson plans in accordance with Office of Correctional Education guidelines?	Yes															

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Carl D. Perkins Act  
Vocational and Technical Education Act Grant

8.	<b>Related Training</b> Is safety and literacy training taking place in accordance with Office of Correctional Education guidelines?	Yes																															
9.	<b>Vocational Classroom Physical Access</b> Are students able to get physical access to the vocational shops over 50% of the time? (Note the "X" and "S" time for the last two prior months).	No	<table border="1"> <thead> <tr> <th colspan="5">Over a two month period</th> </tr> <tr> <th>Prog.</th> <th colspan="2">1<sup>st</sup> month</th> <th colspan="2">2<sup>nd</sup> month</th> </tr> <tr> <th></th> <th>X</th> <th>S</th> <th>X</th> <th>S</th> </tr> </thead> <tbody> <tr> <td>#1:</td> <td>1208</td> <td>1139</td> <td>1116</td> <td>600</td> </tr> <tr> <td>#2</td> <td>58</td> <td>135</td> <td>1562</td> <td>915</td> </tr> <tr> <td>Totals:</td> <td>1266</td> <td>1274</td> <td>2678</td> <td>1515</td> </tr> </tbody> </table>	Over a two month period					Prog.	1 <sup>st</sup> month		2 <sup>nd</sup> month			X	S	X	S	#1:	1208	1139	1116	600	#2	58	135	1562	915	Totals:	1266	1274	2678	1515
Over a two month period																																	
Prog.	1 <sup>st</sup> month		2 <sup>nd</sup> month																														
	X	S	X	S																													
#1:	1208	1139	1116	600																													
#2	58	135	1562	915																													
Totals:	1266	1274	2678	1515																													
10.	<b>Trade Advisory Committee</b> Are quarterly meetings held and minutes kept? <i>(Note the Number of Trade Advisory Committee members, number in the comments section).</i>	No	Number of TAC members: Program #1 0 Program #2 2 Total members: 2																														
11.	As per the Interagency Agreement (Exhibit A) has the Vocational Instructor received hands-on training regarding current changes in technology and or certification in their field?	No	The current teachers' contract does not allow the teachers time-off to attend this training.																														
12.	As per the Interagency Agreement (Exhibit A) has the Vocational Instructor attended trade specific seminars and or technology conferences related to their field?	No	The current teachers' contract does not allow the teachers time-off to attend these seminars or conferences.																														
13.	<b>Supplemental Areas (not counted for points on the overall Compliance Review)</b> Apprenticeship: <ul style="list-style-type: none"> <li>▪ Number of apprentices_____</li> <li>▪ Institutional Pay_____</li> <li>▪ Union/Company Affiliation_____</li> <li>_____</li> <li>▪ Current DAS Form_____</li> <li>▪ OJT Work Logged_____</li> <li>Less than 5 years_____</li> </ul>	N/A																															

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Carl D. Perkins Act  
Vocational and Technical Education Act Grant

14.	Is the shop clean?  (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	
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# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

### Incarcerated Individuals Program

No.	<b>INSTITUTION:</b> CRC <b>DATE:</b> February 8-11, 2010 <b>COMPLIANCE TEAM:</b> Tom Posey	<b>Yes/No or N/A</b>	<b>COMMENTS</b>
1.	Does the Incarcerated Individual Program Teacher have a copy of the new Incarcerated Individual Program Grant?	Yes	<div style="border: 1px solid black; padding: 2px;"> <b>Participants = 61 inmates</b> </div> He has a copy on disk.
2.	Is there a signed Incarcerated Individual Program Enrollment Agreement on file for each participant?	Yes	
3.	Is there evidence on file that each participant graduated from high school or passed the General Education Development exam?	Yes	
4.	Is there a Participant Demographic/ Biographic information sheet on file and has a student file been started?	Yes	
5.	Does the Incarcerated Individual Program Teacher use the Career Ability Placement Survey, the Career Occupational Preference System, and the Career Orientation Placement and Evaluation Survey to identify inmate job skills and are the results on file?	Yes	
6.	Does the Incarcerated Individual Program Teacher track the success of Incarcerated Individual Program participants after they are paroled?	Yes	
7.	Does the Incarcerated Individual Program Teacher provide services to prisons in surrounding areas?	Yes	He provides services to CIW.
8.	Does the Incarcerated Individual Program Teacher use the Internet, phone and fax to establish contact with Parolees	Yes	

# COMPLIANCE REVIEW FINDINGS

## Developmental Disability Program

9.	Does the Incarcerated Individual Program Teacher meet at least once on a quarterly basis with active participants in the Incarcerated Individual Program Program?	<b>Yes</b>	
10.	Does the Incarcerated Individual Program Teacher indicate in the Incarcerated Individual Program database why inmates have dropped or declined to participate in the Incarcerated Individual Program?	<b>Yes</b>	
11.	Does the Incarcerated Individual Program Teacher attend training, Incarcerated Individual Program quarterly meetings and any pertinent conferences?	<b>Yes</b>	
12.	Does the Incarcerated Individual Program Teacher maintain a hard file for each all current and paroled participants of the Incarcerated Individuals Program?	<b>Yes</b>	
13.	Does the hard file contain evidence of a High School Diploma or General Education Development certificate, assessment information, enrollment and tuition agreements and contact information?	<b>Yes</b>	
14.	Does the Incarcerated Individual Program Teacher maintain an up-to-date inventory sheet and is all Incarcerated Individuals Program equipment labeled with an Incarcerated Individual Program tag?	<b>Yes</b>	
15.	Does the Incarcerated Individual Program Teacher check to ensure that any transfers from other institutions still maintain eligibility?	<b>Yes</b>	
16.	Does the Incarcerated Individual Program Teacher use the Offender Based Information System to update the candidate pool on a monthly basis?	<b>Yes</b>	HQ sends an OBIS report monthly.

# COMPLIANCE REVIEW FINDINGS

## Developmental Disability Program

17.	Does the Incarcerated Individual Program Teacher Issue trust withdrawals for any books or equipment loaned to participants?	<b>Yes</b>	
18.	Does the Incarcerated Individuals Program teacher ensure all information for each participant is current and up-to-date and includes the California Department of Corrections and Rehabilitation number, full name, date enrolled in the Incarcerated Individuals Program, the Earliest Possible Release Date and date of birth?	<b>Yes</b>	
19.	Does the Incarcerated Individuals Program teacher record all training programs as a separate record and include any tuition agreements?	<b>Yes</b>	
20.	Does the training file contain the Program Name, entry and exit dates, notes on status of the course, course completion and earned grade?	<b>Yes</b>	
21.	Does the Incarcerated Individuals Program teacher maintain records of each participant's training expenses, date, training provider, training program name, participant's name, California Department of Corrections and Rehabilitation number and applicable notes?	<b>Yes</b>	
22.	Does the Incarcerated Individuals Program teacher have access to a computer with internet capabilities? i.e. access with log-on capabilities?	<b>Yes</b>	

# DEPARTMENT OF CORRECTIONS AND REHABILITATION



*Education Compliance Branch*

## **COMPLIANCE REVIEW FINDINGS**

**California Rehabilitation Center**

**February 8-11, 2010**

**Developmental Disability Program**

**Sarita Mehtani**

# COMPLIANCE REVIEW FINDINGS

## Developmental Disability Program

No.	<b>INSTITUTION:</b> CRC <b>DATE:</b> February 10, 2010 <b>COMPLIANCE TEAM:</b> Sarita Mehtani	Yes/No or N/A	<b>COMMENTS</b>
1.	<b>Administration:</b>	Yes	
	Are all Developmental Disability Program staff hired and in place?		
2.	Are all Developmentally Disabled Program staff appropriately assigned and under the supervision of the Principal (via Vice Principal) in accordance with California Department of Corrections and Rehabilitation policy?	Yes	
3.	Do all Developmentally Disabled Program education and library staff perform the required duties (Duty Statement) as described in the Clark remedial Plan?	Yes	
4.	Has all education staff received training in performing the required duties as described in the Clark Remedial Plan?	Yes	The last training was held in January of 2009.
5.	Are inmate academic assignments being made in accordance with the Clark Remedial Plan?	Yes	
6.	Are inmate vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course description and an inmate's ability to perform the essential functions of the assignment as described in the Clark Remedial Plan?	Yes	
7.	<b>Developmentally Disabled Program Staff; Academic and Vocational Programs:</b>	Yes	
	Is the Developmentally Disabled Program Teacher participating in the Interdisciplinary Support Team (IDST)/Initial Classification Committee (ICC)/Unit Classification Committee (UCC) meetings?		

# COMPLIANCE REVIEW FINDINGS

## Developmental Disability Program

8.	Does the Developmentally Disabled Program Teacher have a current roster of all Developmentally Disabled Program inmates assigned to academic and vocational education programs?	Yes	
9.	Are all of the required assessments completed within the timelines as outlined in the Clark Remedial Plan?	Yes	
10.	Is there a current Individually Tailored Education Plan (ITEP) for inmates assigned to education receiving education services from the Developmentally Disabled Program Teacher?	Yes	
11.	Is there documentation of education services provided to assigned Developmentally Disabled Program inmates?	Yes	
12.	Does the Developmentally Disabled Program Teacher hold Student Study Team (SST) meetings with the regular classroom teacher, Education Supervisor and inmate?	Yes	
13.	<b>Library/Law Library Developmentally Disabled Program Library Technical Assistant:</b>	Yes	
	Is orientation provided to all Developmentally Disabled Program inmates regarding the Law Library and other library services?		
14.	Is there documentation available on services provided to Developmentally Disability inmates on California Department of Corrections and Rehabilitation Form 128B, Library Log, etc.?	Yes	
15.	Is reasonable access to forms, regulations and procedures in the available in the Library?	Yes	
16.	Is equipment and materials available for inmates with a disability as described "Library Access" of the Clark Remedial Plan?	Yes	
17.	Are alternative materials available in the library?	Yes	

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

OPERATIONAL PEER REVIEW

REPORT OF FINDINGS

INMATE  
APPEALS

CALIFORNIA REHABILITATION CENTER  
FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

INMATE APPEALS BRANCH

# ***FINAL REPORT***

## **INMATE APPEALS AUDIT**

***California Rehabilitation Center***  
**October 30, 2006 through November 1, 2006**

**Review Team:** S. Wright, Facility Captain, Inmate Appeals Branch  
R. Pennington, Facility Captain, Inmate Appeals Branch

### **SUMMARY CHART**

AREA REVIEWED		COMPLIANCE RATING 2002
	Percentage	Page No.
<b>OVERALL RATING</b>	<b>92%</b>	
A. ACCESS TO INMATE APPEALS	98%	2
B. TRACKING/FILING APPEALS	99%	4
C. PREPARATION OF APPEALS	83%	5
D. TIMEFRAMES	<i>Amended score</i> 97%	6
E. APPEAL RESPONSES	91%	7
F. SPECIALIZED PROCESSING OF APPEALS	100%	8
G. TRAINING and OFFICE STAFFING	100%	9
H. OVERDUE APPEALS	100%	10



# California Rehabilitation Center

October 29, 2006 through November 1, 2006

## INMATE APPEALS AUDIT

*The findings in this Inmate Appeals Audit resulted in an overall score of 95%. Three areas received 100% and they were Specialized Processing of Appeals, Training and Office Staffing, and Overdue Appeals. Those areas plus the areas receiving less than 100% are listed below with applicable notations. The institution is to be commended for not having any overdue appeals.*

*It should be noted that staff interviewed were knowledgeable and familiar with the established departmental and institutional policies and procedures relative to the appeals process. The CC-II and Appeals Coordinator, Dwayne Mugiishi, is experienced and knowledgeable in all facets of the appeals process. Staff were able to locate documents needed for the Review and provide information in a timely manner. It was indeed a pleasure to work with CC-II Mugiishi.*

The specific sections and their corresponding questions and scores are identified below.

Copies of the Inmate Appeals Worksheets are available upon request.

### A. ACCESS TO INMATE APPEALS:

Section Rating: 98

- 1) Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate? [CCR 3084.1 (c)]

41 sample # 39 # correct = 91 %

Question Rating: 50

Score: 48

*\*Every housing unit and library had a good supply of both CDC Form 602s and 1824s. Staff were very helpful in providing these forms to the Review Team.*

- 2) Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and any facility appeal supplement in each inmate law library? [DOM Section 53060.11, 54100.3]

2 sample # 2 # correct = 100 %

Question Rating: 10

Score: 10

- 3) Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]

Yes

Question Rating: 20

Score: 20

*While in Receiving and Release (R&R,) upon arrival, the inmates at CRC are provided a "Fish Kit" which includes an Orientation Handbook and a California Code of Regulations, Title 15 (CCR). The Inmate Appeals Process is explained in both of these booklets.*

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
October 29-Nov 1, 2006  
Page 3 of 11

- 4) Does the institution provide the orientation inmates verbal staff instruction regarding the inmate's right to appeal and appeal procedures? [CCR 3002(a)(2)]

Yes

Question Rating: 20

Score: 20

*\*Inmates are provided a verbal Orientation presentation upon arrival to the Housing Unit, and staff are available to answer any questions the inmates may have regarding the appeals process.*

SECTION POINT TOTAL

**98**

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
October 29-Nov 1, 2006  
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**B. TRACKING AND FILING APPEALS**

**Section Rating: 99**

- 1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]**

Yes

Question Rating: 15      **Score: 15**

- 2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]**

sample # 100 # correct = 97 % Question Rating: 25      **Score: 24**

- 3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]**

sample # 9 # correct = 100 %      Question Rating: 25      **Score 25:**

- 4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?  
[CCR 3084.6, DOM 54100.12]**

Yes

Question Rating: 35      **Score: 35**

*\*It is noted the Administrative Staff are noticed weekly of the overdue appeals and the Administrative Staff are diligent in their efforts to bring the overdue list to zero. It is also noted that Administration is supportive in maintaining a zero tolerance for overdue appeals.*

**SECTION POINT TOTAL 99**

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
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<b>C. PREPARATION OF APPEALS</b>	<b>Section Rating</b>	<b>83</b>
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- 1) Are inmates interviewed at the first level of review or at second level if first level is waived? [CCR 3084.5 (f) and DOM 54100.14]**

90 sample # 69 # correct = 77 %      Question Rating: 25      **Score: 19**

*The low score in this section is due mostly to staff not interviewing inmates, but merely providing only the response on the actual 602 form.*

- 2) Do the dates on the appeal correspond with the dates on the IATS? [DOM Section 54100.9]**

100 sample # 78 # correct = 78 %      Question Rating: 25      **Score: 20**

*The low score in this section is due mostly to the completion dates varying between the date on the 602 and the IATS. There were some instances where the date completed on the 602 by the reviewer, and the date completed on the IATS did not agree.*

- 3) A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)? [DOM Section 54100.3]**

100 sample # 75 # correct = 75 %      Question Rating: 25      **Score: 19**

*The lower score in this question is the result of dates missing on the 602s. Most appeals were missing the "Returned to Inmate" date at the Second Level of Review. A few of the appeals reviewed did not include the "assigned" and "due" dates. Staff are failing to ensure these areas are completed prior to submitting the appeal.*

- 4) Is there evidence that appeal decisions are reviewed by the institution head or his/her designee? ?[CCR 3084.5(e)(1)]**

29 sample # 29 # correct = 100 %      Question Rating: 25      **Score: 25**

SECTION POINT TOTAL 83

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
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Page 6 of 11

**D. TIMEFRAMES**

**Section Rating: 97**

- 1) Are appeals being assigned at each level within five working days of receipt in the Appeals Office? [DOM 54100.9]**

100 sample # 100 # correct = 100 %      Question Rating: 25      **Score: 25**

*The auditor notes that there is only one staff member in the Appeals Office, the Appeals Coordinator, and he doing a good job processing appeals.*

- 2) Are informal appeals completed within ten working days? [CCR 3084.6 (b)(1)]**

24 sample # 24 # correct = 100 %      Question Rating: 25      **Score: 25**

- 3) Are first-level responses completed within 30 working days? [CCR 3084.6 (b)(2)]**

76 sample # 71 # correct = 93 %      Question Rating: 25      **Score: 23**

- 4) Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)? [CCR 3084.6 (b)(3)]**

29 sample # 29 # correct = 100 %      Question Rating: 25      **Score: 25**

*\*The low scores regarding timeframes are a result of only one staff member working in the Appeals Office.*

**SECTION POINT TOTAL 97**

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
October 29-Nov 1, 2006  
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**E. APPEAL RESPONSES**

**Section Rating: 91**

- 1) Does the institution prepare a written response at the first level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

76 sample # 58 # correct = 76 %

Question Rating: 25      **Score: 19**

*\* Many first level responses did not restate the appeal issue when they were handwritten on the 602.*

- 2) Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered? [CCR 3084.5 (g) and DOM 54100.15]**

76 sample # 73 # correct = 96 %

Question Rating: 25      **Score: 24**

- 3) Does the institution prepare a written response at the second level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

29 sample # 28 # correct = 97 %

Question Rating: 25      **Score: 24**

- 4) Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?**

[CCR 3084.5 (g) and DOM 54100.15]

29 sample # 28 # correct = 97 %

Question Rating: 25      **Score: 24**

SECTION POINT TOTAL **91**

CRC  
October 29-Nov 1, 2006  
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**Section Rating: 100**

## STAFF COMPLAINTS

- Yes Question Rating: 20 **Score: 20**

- Yes Question Rating: 15 **Score: 15**

- Yes Question Rating: 15 **Score: 15**

- Yes Question Rating: 15 **Score: 15**

10 sample # 10 # correct = 100 %      Question Rating: 25      **Score: 25**

Yes Question Rating: 10 **Score 10**

Page 8

INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
October 29-Nov 1, 2006  
Page 9 of 11

<b>G. TRAINING/OFFICE STAFFING</b>	<b>Section Rating: 100</b>
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1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3]

Yes

Question Rating: 20      **Score: 20**

2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2]

Yes

Question Rating: 30      **Score: 30**

3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in Department policy? [DOM 32010.8.4, 54100.3]

Yes

Question Rating: 30      **Score: 30**

4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(a) and 3041(e)(1)]

Yes

Question Rating: 20      **Score: 20**

*There is no inmate assigned in the Appeals Office*

SECTION POINT TOTAL      **100**



INMATE APPEALS AUDIT  
FINAL REPORT

CRC  
October 29-Nov 1, 2006  
Page 10 of 11

**H. OVERDUE APPEALS**

**Section Total: 100**

- 1) What is the number of overdue First Level appeals and by how many days late?**  
[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days		.25	
31-90 days		.50	
91-180		.75	
181+		1	

**Question Rating: 50**  
**Points deducted:**  
**Score: 50**

- 2) What is the number of overdue Second Level appeals and by how many days late?**  
[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days		.25	
31-90 days		.50	
91-180		.75	
181+		1	

**Question Rating: 50**  
**Points deducted:**  
**Score: 50**

**APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):**

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	
31-90 days	0	.50	
91-180	0	.75	
181+		1	

# of Appeals: 0

Points Deducted:     

**Score: N/A**

**SECTION POINT TOTAL 100**

INMATE APPEALS AUDIT  
FINAL REPORT

CRC

October 29-Nov 1, 2006

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**ADDITIONAL AREAS OF REVIEW:** This portion of the audit tool has been added in September 2006. These areas of the institution will be reviewed for information gathering; however, scores will not be obtained.

**1. Law Library access for SHU and ASU inmates\*:**

*\*This section is not applicable due to no SHU or ASU at CRC*

- a) What is the process for allowing SHU and ASU inmate's access to the law library?  
[CCR 3122, 3160, 3164, 3343]
- b) How often do these inmates have access to the law library?
- c) How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates?

**2. Medical Appeals Process:**

When visiting the Medical Appeals Analyst office, inquire as to the following:

- a) What is the process for answering medical and ADA appeals?

Who responds?

The Medical staff who are responsible for the issues

Who interviews the inmate?

Physicians or the Medical Appeals Analyst

Who prepares the response?

Medical Appeals Analyst\_

- b) Talk to the CMO/HCM regarding the medical appeals process.

Yes

**3) Inmates housed in the Hospital:**

- a) How do they access the Appeals Process (forms, etc.)

Staff from the facilities where inmates are housed are required to respond to the appeal issue on the same day inmate generates an appeal. Appeal forms are readily available for inmates housed in the hospital.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION  
BED UTILIZATION REVIEW

CALIFORNIA REHABILITATION CENTER

FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

CLASSIFICATION SERVICES

# CALIFORNIA REHABILITATION CENTER

February 5 through February 12, 2010

## ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The California Rehabilitation Center (CRC) Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during February 5 through February 12, 2010. Correctional Counselors (CC)-III M. Scott and B. Castorena, assisted by CC-III K. Baughman and CC-II J. Richardson; conducted the review.

The intent of this review is to provide an evaluation of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution to assist in identifying areas that could reduce time spent in ASU and overcrowding in ASU. A review of CRC's Administrative Segregation Log, reflected approximately 88 inmates housed in ASU. Approximately 30 cases were reviewed by the team and 24 were included in the Report.

The cases reviewed were broken down into the following categories:

16 were placed in Administrative Segregation based on a pending Disciplinary charge.

0 were placed in Administrative Segregation based on safety concerns. See Safety Concern section for comment regarding this irregularity.

8 were placed in Administrative Segregation based on a pending Prison Gang evaluation.

**Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU?** CRC does have an ASU tracking method in the form of a CRC Higher Custody Status Report. The tracking log contained information which included ASU arrival date ("TX DATE"), "114D DATE", "ICC DATE", ASU Expiration date ("ASU EXT"), Status and "REQUIRED ACTION". "114D DATE" appears to be the same as the "TX DATE". "Status" was indicated by a two to four letter code (such as CSR, EXCL, TX). "Required Action" seemed to clarify the reason for the inmate's retention in ASU such as a pending RVR, transfer and status of ICC or CSR referrals. The log was presented by inmate name in alphabetical order. The tracking log presented appeared current but does not especially alert staff to cases which may be heading for trouble-- for example, including the date adjudicated RVRs are received would alert staff when ICC is due for SHU review and transfer referral.

**Comment:** While it is understandable institutions utilize tracking logs that are best suited for the needs of their individual institutions, all tracking logs must contain the information necessary for

staff to easily identify potential problem areas. It is important Wardens and their executive staff review the tracking log being utilized in their institution to ensure all information necessary to effectively track the ASU population, classification due dates, and the CSR extension approvals is available. If institution staff are having difficulties with their tracking log, they are encouraged to contact their Associate Director's office or the Classification Services Unit for assistance in improving their tracking logs. Refer to the 3/18/2009 Memorandum entitled "Utilization and Management of Administrative Segregation Beds".

### **GENERAL ASU CASE PROCESSING TIMES**

#### **Period from Initial Placement in ASU to CSR Review**

*California Code of Regulations (CCR) 3335(c)(1) requires that the Institution Classification Committee refer the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.*

**California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.**

Time from the date of placement in Administrative Segregation to the initial ICC referral for CSR Review ranged from **5** days to **10** days. Of the cases reviewed, **100%** met this expectation. (The percentage is calculated by taking the number of cases meeting the criteria and dividing it by the total number of these cases reviewed. Example, if you looked at 50 cases and 42 met this criterion; you would divide 42/50 which would calculate to 84%).

**It is the expectation that cases referred for ASU retention be presented to the Classification Staff Representative (CSR) for review within 30 days of the Classification committee referral (California Code of Regulations 3335(e)).**

Time from the initial ICC referral for CSR Review to the actual CSR review ranged from **5** days to **21** days. Of the cases reviewed, 100 % of the cases were presented to the CSR within 30 days of the Classification committee referral.

**When an ASU case is reviewed by a CSR, the CSR will indicate a time period in which the case must be presented again to a CSR for further review. The expectation is that all cases should be presented back to a CSR prior to the expiration of the ASU**

**extension approved.**

Of the cases reviewed, there are **0** cases currently retained in ASU beyond the CSR approved retention date. **(The expectation is there should be 0 cases in this category).** There was 100 percent compliance in this area.

## **DISCIPLINARY CASES**

### **Hearing Timelines**

*Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney (DA) review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.*

A total of 16 RVRs were reviewed.

#### **RVRs heard without postponement:**

5 RVRs were examined.

Time from the date of the issuance of the RVR to the date the RVR was heard ranged from 30 days to 67 days.

#### **RVRs heard with postponement pending DA action:**

3 RVRs were noted.

Revoked postponements were included in this number. Time from the date of the RVRs to the date the RVRs were heard ranged from 42 to 68 days.

Auditors were generally unable to determine whether a pending RVR had been postponed pending DA referral / outcome. The Initial ICC did not address this issue. Rather the postponement was addressed during a subsequent ICC in response to the CSR granting less than the requested ASU extension pending clarification of DA postponement.

### **Post-Hearing Processing Timelines**

*Following the completion of the hearing by the disciplinary hearing officer or committee, there*

*are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.*

8 RVRs are still pending.

**Hearing to Facility Captain Review:**

**Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 5 working days.**

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from **1** day to **22** days.

Of the cases reviewed, **25%** met this expectation. On average, the Captain's review of the RVR occurred 14 days after the hearing.

Staff have clarified the inmate clerks pre-type the *date* of the hearing into the SHO signature block. However the actual SHO signature on the adjudicated RVR occurs significantly later than the hearing date—typically by more than a week. As a result the Captain's review of the RVR appears overdue but in fact occurs only couple of days after the actual signature date of the SHO. It is recommended processing of the RVR be reviewed to ensure timeliness of the typing process and accuracy of the subsequent review/ signature dates.

**Facility Captain to Chief Disciplinary Officer Review:**

**Per the Deputy Director memorandum dated March 26, 2003, the expectation is this time will be within 3 working days.**

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from "**0**" (as in same day as Captain's review) days to **7** days.

Of the cases reviewed, **63%** met this expectation. On average, the CDO's review did occur 3 days after the Captain's review.

**Chief Disciplinary Officer to ICC review:**

**Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate's case within 14 days.**

For the 6 adjudicated RVRs which had subsequent ICC review, time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from “18” days to 51 days. Two other cases were noted which had been adjudicated on 12/31/09 and 1/5/2010 (Perez, T-26387 and Ramirez F-17371) and have not had subsequent ICC review as of this audit.

Of the cases reviewed, 0% met this expectation. Time from the date the CDO audited the RVR to the case being reviewed by ICC averaged 32 days.

Based on conversation with CRC ASU staff, there appears to be an efficient procedure for notifying classification staff expeditiously of adjudicated RVRs. Per staff, the Hearing Lieutenant brings a copy of adjudicated RVRs to the CC-II. The CC-II is required to sign for the RVR copy via signature on the cover-sheet. However staff have further clarified the case is not presented to ICC until a case records analyst has updated the release date. Staff indicate this procedure is being changed to eliminate the analyst review prior to the ICC, which should allow for more timely ICC review after the RVR has been adjudicated. Follow-up should be conducted to evaluate the effectiveness of this change in procedure.

Parole Violator Cases referred to the Board of Prison Hearings (BPH) for review:

This area was not addressed. Based on the extremely small number of cases which were referred to the BPH, there is insufficient data to provide a fair evaluation.

**Incident Report Processing**

*Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.*

ISU staff at CRC were interviewed regarding procedure for incident report processing. ISU staff report the Watch Commander is contacted at least once per week to obtain the incident reports. ISU enters this information into an Incident Report log. A portion of the log was reviewed by this auditor for the time period of mid October 2009 through January 2010. The log collected information which includes date CDC 837 was received, whether case was screened-out (“CRC Reject”), whether the case was referred to the DA (“DA Ref”), whether the case was rejected or accepted and the date/ disposition of the case. The Log appears useful however the screen-out portion (“CRC Reject”) was primarily blank. Therefore it is unclear whether ISU screen-outs are being done in a timely manner. Also noted, there many cases dated prior to December 31, 2009 which did not indicate whether the case was referred to the DA (“DA REF” was blank) therefore it is unknown whether the case was



referred to the DA. The current Incident Report tracking log does not give clear indication that cases are being screened out or referred to the DA in a timely manner due to missing information in the Log.

During this audit, reviewers noted many of the cases lacked information in the central files regarding the status of DA referrals. Typically the DA related documents (DA Referral memorandums, DA Acceptance or Rejection memorandum or ISU Rejection (Screen-out) memorandum) were not found in the file with the exception of RVRs which had been completely adjudicated. ISU staff have indicated these documents are generated to reflect the status of the pending DA referral and the documents are forwarded to various staff, including the C&PR; however ISU does not personally deliver these documents to Records for placement into the central file. ISU reports staff personally go at least once per week to the DA's Office to deliver referrals and pick-up the copies of the DA decisions.

**Per the Deputy Director memorandum dated March 26, 2003 the complete incident report package will be presented to ISU within 21 calendar days.**

Date from incident occurrence to the date ISU received the Incident Report ranged from 2 days to 100 days with 43 % being received by ISU within 21 days. Staff should examine current procedure for improvement in efficiency related to ISU's receipt of the incident report.

Regarding the date ISU receives the CDC 837 to DA screen-out or referral: As noted previously, information related to when ISU conducted the screen-out of the incident report was generally not available, therefore this section could not be rated. **Per the Deputy Director memorandum dated March 26, 2003 the expectation is the time should not exceed 5 working days.**

Regarding DA Referral to Resolution: **This is one area that the institution has no definitive control over, however, it is suggested that the institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution.**

Based on the auditors findings, it is recommended current procedures be re-evaluated to ensure cases are being screened out or referred to the DA in a timely manner. Steps should also be taken to ensure critical ISU documents (ISU screen-out, DA Reject) are in fact distributed to custody staff (Hearing Lieutenant) in a timely manner thus enabling timely processing of RVRs. An Incident Report log already in use would be a better tool if updated properly.

### **SAFETY CONCERNS**

*When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints that delay the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.*

There were no cases reviewed that were placed in Administrative Segregation based on safety concerns. It is believed that safety concern cases were placed into or released from ASU into CIM's Reception Center/ GP, on "higher custody" status. CRC staff have reported safety investigations generally begin at the time of ASU placement and the Facility Captain brings the closure document to the classification staff. The following is provided for informational purposes.

**Regarding investigation initiation to completion: Per the Deputy Director memorandum dated March 26, 2003 the expectation is this time should not exceed 30 calendar days.**

**Regarding investigation completion to ICC Review: Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate's case within 14 days.**

### **GANG INVESTIGATION/VALIDATION/DEBRIEFING**

*When an inmate is placed into ASU based on the need for investigation of gang activity, there are no due process time constraints, which delay the resolution and completion of the investigation. This timeline measures the amount of time taken to complete this type of investigation, the review by the Office of Correctional Safety (OCS) and the time to review and conclude the issue by ICC and CSR.*

There were 8 cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation.

ASU Placement to Referral to IGI for Investigation:

With two exceptions, the investigations had already been received by ISU at the time of the inmate's placement into ASU. For the two cases where there was indication the investigation had not been received by IGI, days from ASU placement to IGI investigation assignment being received by IGI were 6 days (both cases).

Initiation of IGI investigation to Conclusion of Investigation:

Three of the eight cases had investigations completed by IGI at the time the inmate was placed into ASU. Days from IGI investigation assignment to receipt of completed investigation for the remaining five cases ranged from **2** days to **121** days.

Conclusion of Investigation to ICC Review:

This area was not evaluated as the case worksheets and corresponding EXCEL program were not designed to capture this updated information. For informational purposes:

**Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate's case within 14 days.**

**NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER**

Documentation in the central files indicates that 6 of the cases reviewed in ASU are endorsed and awaiting transfer. A total of 13 cases in ASU are currently awaiting transfer.

**SUMMARY AND RECOMMENDATIONS**

1. California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement. 100 percent of the cases met this expectation.
2. It is the expectation that cases referred for ASU retention be presented to the CSR for review within 30 days of the Classification committee referral (California Code of Regulations 3335(e)). 100% of the cases met this expectation.
3. When an ASU case is reviewed by a CSR, the CSR will indicate a time period in which the case must be presented again to a CSR for further review. The expectation is that all cases should be presented back to a CSR prior to the expiration of the ASU extension approved. 100% of the cases met this expectation.
4. Related to the disciplinary process, Per the Deputy Director memorandum dated March 26, 2003, the expectation is the RVR will be reviewed by the Captain within 5 working days. Of the cases reviewed, **25%** met this expectation. On average, the Captain's review of the RVR occurred 14 days after the hearing. It is recommended processing of the RVR be reviewed to ensure timeliness of the typing process and accuracy of the subsequent review/ signature dates.
5. Related to the disciplinary process, Per the Deputy Director memorandum dated March 26, 2003, the expectation is the RVR will be reviewed by the CDO within 3 working days of the Captain's audit. Of the cases reviewed, **63%** met this expectation. On average, the CDO's review did occur 3 days after the Captain's review.

6. Per CCR 3335(d) (1) (2), upon resolution an ICC shall review the inmate's case within 14 days. Of the cases reviewed, **0%** met this expectation. Time from the date the CDO audited the RVR to the case being reviewed by ICC averaged 32 days. Follow-up should be conducted to evaluate the effectiveness of a planned change in procedure to eliminate the case records analyst review prior to taking the case to ICC.
7. Per the Deputy Director memorandum dated March 26, 2003 the complete incident report package will be presented to ISU within 21 calendar days. **43 %** of the incident reports are received by ISU within 21 days. Staff should examine current procedure for improvement in efficiency related to ISU's receipt of the incident report.
8. It is recommended current procedures be re-evaluated to ensure cases are being screened out or referred to the DA in a timely manner, as this information could not be determined due to a general lack of documentation. Steps should also be taken to ensure critical ISU documents (ISU screen-out, DA Reject) are in fact distributed to custody staff (Hearing Lieutenant) in a timely manner thus enabling timely processing of RVRs. An Incident Report log already in use by ISU would be a better tool if updated properly.

### **GENERAL OBSERVATIONS**

- The Administrative Segregation Log was reviewed for the status of some of the problem cases noted in this report. The log did not provide information to alert staff that these cases were "in trouble". For example, the log reflects that an adjudicated RVR was received by staff, however there is no indication as to when staff received the RVR. Knowing the date the RVR was received may have aided in more timely presentation of the case to ICC.

CRC staff were helpful and cooperative in supplying information, documents and central files related to this audit. Their assistance was greatly appreciated.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenout or Reeferral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
G06198	8	5	3/4/10	0	9/10/09	Drug Dist.	Revoked	68	22	7	29	19	0	N/A	S/O	125	Found Guilty, 9 mo SHU term approved w/MERD of 4/3/10, Pending TX to COR-SHU.
F17371	8	6	5/11/10	0	11/4/09	Batt I/M W/WPN	No	42	20	0	N/A	83	0	N/A	Pending	97	Found Guilty, Pending ICC review after CDO.Pending DA Referral.
F10332	9	13	4/20/10	0	10/12/09	Consp. Batt I/M W/WPN	No	35	9	6	51	100	0	N/A	S/O	126	Found Guilty, 15 mo SHU term aproved w/MERD of 9/14/2010.
F88124	10	13	5/18/10	0	11/5/09	Poss. WPN	Yes	N/A	0	0	0	60	0	N/A	S/O	92	Pending Adjudication Process.
AA5838	7	14	3/18/10	0	12/29/09	Batt I/M	0	N/A	0	0	0	N/A	0	0	0	40	No indication inmate postponed pending DA. Inmates name is not in the ISU tracking log.
K86702	6	13	5/18/10	0	11/13/09	Consp. Drug Dist.	Yes	N/A	0	0	0	-40130	0	0	0	88	Pending Adjudication Process.Based on ISU tracking log, there is no indication this case has been referred to the DA.
T26387	6	6	3/24/10	0	10/23/09	Drug Dist.	No	67	1	1	N/A	25	0	98	Accept	249	Found Guilty, Pending ICC review after CDO.OTC from 10/16/09 to 12 11/09, Rec 7 years additional commit.
V31056	5	13	4/3/10	0	10/8/09	Poss. WPN	Yes	N/A	0	0	0	26	83	N/A	Pending	122	Pending Adjudication Process. Pending DA Referral.
V11954	5	13	4/13/10	0	10/10/09	Consp. Drug Dist.	Yes	68	19	0	30	54	0	0	S/O	122	Found Guilty, 8 month 23 day SHU term assessed, pending CSR review for SHU audit & transfer.
F83938	7	14	2/23/10	0	11/18/09	Batt Peace Officer	No	30	3	1	44	75	0	N/A	Pending	83	Found Guilty, 12 mo SHU term assessed, Pending CSR review for SHU audit & transfer.
J84430	5	13	3/2/10	0	8/28/09	Poss. WPN	Yes	N/A	0	0	0	83	0	55	Reject	164	Pending Adjudication Process.
G57749	8	20	6/3/10	0	11/4/09	Batt I/M W/WPN	Yes	42	20	5	18	2	81	N/A	Pending	97	Found Guilty, 15 mo SHU term approved w/MERD of 10/12/2010. Pend TX to CCI SHU. Pending DA.
G08740	6	6	4/8/10	0	9/9/09	Consp. Batt I/M W/WPN	No	40	22	0	23	13	0	0	Pending	172	Found Guilty, 15 mo SHU term approved w/MERD of 7/29/2010. Pend TX to CCI SHU.
AA9899	5	13	4/21/10	0	1/16/10	Threatening Staff	N/A	N/A	0	0	0	N/A	0	0	0	24	Pending Adjudication Process.

## DISCIPLINARY

[illegible]

## DISCIPLINARY

[illegible]

# GANG

[illegible]



CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

OPERATIONAL PEER REVIEW

REPORT OF FINDINGS

RADIO  
COMMUNICATIONS

CALIFORNIA REHABILITATION CENTER  
FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

TELECOMMUNICATIONS

# **Review of Radio Communications**

## **CALIFORNIA REHABILITATION CENTER, NORCO**

### **Introduction**

This review of Radio Communication Operations at California Rehabilitation Center (CRC) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Reviews and Compliance and the Radio Communications Unit (RCU), between the dates of February 22-25, 2010. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM), State Administrative Manual (SAM) and Administrative Bulletin (AB) 90/35 as the primary sources of operational standards.

This review was conducted by Chris Kinman, Project Manager, of the Enterprise Information Services Division, Radio Communications Unit.

The review consisted of an on-site inspection, interviews with staff, reviews of procedures, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of Federal/State regulations as applied to Public Safety Communications. Each area was reviewed with staff and any problems were reviewed or solved with the CRC Radio Liaison. Overall, findings presented in the attached report represent the consensus.

## **Review of Radio Communications**

### **CALIFORNIA REHABILITATION CENTER**

#### **REVIEW SCOPE AND METHODOLOGY**

The CPRB and the RCU conducted an on-site review at CRC during the period of February 22-25, 2010. The purpose of this review was to assess the level of compliance with established Federal/State regulations in the areas of Public Safety Communications. This review and the attached findings represent the formal review of CRC's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to CRC's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process. Throughout the tour, on-duty custody, medical, and plant operations staff were interviewed regarding current practices; staff were polite and professional when asked these questions. It was discovered that the Transportation Unit was not utilizing the off grounds radios (CMARS, CLEMARS) to the most available use, instead were relying on assigned cell phones.

A random sample of radios were reviewed, checking the Radio as to the Post Assignment, the Public Safety Communications Division (PSCD) 'S' number and the radio serial number. Utilizing the inventory to prove the proper radio location, CRC was at 100% on radio placement.

The Primary Emergency Operations Center control station, CMARS remote and CLERS radios located in the Warden's Conference room were working properly.

Recommendations are to continue normal practices as CRC has no issues with usage of the 800 MHz Trunked Radio System and CRC staff are following all required Public Safety Standards. Recommendations for Off Grounds communications (CMARS, CLEMARS, and CHP Blue Channel) should be established as unit specific training, afforded as OJT by unit supervisors. All available radio training lesson plans are available with IST and the Radio Liaison.

The Reviewer would also like to complement the Radio Liaison at CRC as his organizational skills and overall help made this review a success.

# Radio Communication Compliance Review California Rehabilitation Center Exit Conference Discussion Notes February 8-12, 2010

The Office of Audits and Compliance (OAC) and the Radio Communication Unit (RCU) conducted a Radio Communication Security Compliance Review California Rehabilitation Center State Prison the week of February 8-12, 2010. The review covered 28 different areas.

The chart below details these outcomes.

## FINDINGS SUMMARY:

		Compliant	Partial Compliance	Non Compliant
1	Radio Liaison Identified?	Compliant		
2	Inventory System in Place?	Compliant		
3	All Radios Accounted for?	Compliant		
4	Radio Matrix in place?	Compliant		
5	Repair Procedure?	Compliant		
6	Repair Tracking?	Compliant		
7	Battery Management in Place?	Compliant		
8	Proper usage of Battery Management?	Compliant		
9	Inmate Access to Radios?	Compliant		
10	Radio Vault Secured?	Compliant		
11	Intrusion alarm on Radio Vault?		Partial Compliance	
12	Authorization to enter Vault?	Compliant		
13	Key to Vault Secured?	Compliant		
14	Vault key access for DGS-TD Tech?	Compliant		
15	System Watch/SIDR Computer Secured?	Compliant		
16	Procedure to operate SW/SIDR?	Compliant		
17	Staff to operate SW/SIDR?	Compliant		
18	System Watch/SIDR Training?	Compliant		
19	Chit System in place for Radios?	Compliant		
20	Other Radios on grounds?	Compliant		
21	Scanners on Grounds?	Compliant		
22	Who do you contact for System Malfunction?	Compliant		
23	Steps taken when System Fails?	Compliant		
24	Staff have knowledge on Radio Fail-Soft?	Compliant		
25	Staff have knowledge of RCU Staff?	Compliant		
26	Off Grounds Communication?		Partial Compliance	
27	Working CLERS System?	Compliant		
28	Working CMARS System?	Compliant		
Total				

The radio vault alarm is non-operational due to its age and non availability of parts, but the vault in in the site c Transportation Unit is relying on cell phones more that the use of CMARS, CLEMARS radio systems

12, 2010.

of a 24/7 post

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S  
OFFICE OF AUDITS AND COMPLIANCE

OPERATIONAL PEER REVIEW

REPORT OF FINDINGS

CASE RECORDS

CALIFORNIA REHABILITATION CENTER  
FEBRUARY 1 THROUGH FEBRUARY 12, 2010



CONDUCTED BY

CASE RECORDS ADMINISTRATION

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

Correctional Case Records Services lead a three member team comprised of Kathy Moore, Correctional Case Records Administrator, Sherri Mohr, Correctional Case Records Manager, CSP-Lancaster, and Tammy Fenton, Correctional Case Records Supervisor, Folsom State Prison to conduct a compliance review February 8, 2010, through February 12, 2010, of specific areas within the California Rehabilitation Center – Felon records office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and all staff was cooperative and assisted with providing information to the review team when requested.

The two primary areas reviewed were:

1. Holds, Warrants and Detainers (HWD)
2. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

This review consisted of fifty nine (59) Central Files of recently paroled inmates and an additional twenty eight (28) Central Files for HWD purposes for a total of eighty seven (87) Central Files reviewed.

### **HOLDS, WARRANTS AND DETAINERS (HWD)**

*Reference: DOM Section 72040.5 & 72040.5.1 & 72040.5.3 & CR 97/04*

*"The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate's custody."*

*"The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log."*

*"The HWD Coordinator's initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit."*

*"If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts, and immediately contacting the designated staff person responsible for evaluating the potential detainer..."*

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

*“Release Prior to Parole. It is imperative that when an inmate is released prior to their parole date, pursuant to Penal Code Section 4755, that a CDC Form 801, Detainer, accompanies the inmate to ensure that he/she remains in custody until his/her actual parole date.”*

*Reference: DOM Section 72040.9 & CR 99/23*

*“When the records office receives notification that a detainer previously placed on an inmate has been dropped or expired, the HWD computerized history for that detainer shall be deleted”.*

*Reference: DOM Section 72040.5.3*

*“Notify inmate in writing that a detainer has been received and recorded using a CDC Form 661, Detainer Memorandum. A copy of the detainer shall be provided to the inmate and they shall be advised what action may be taken to request disposition of the detainer”.*

*Reference: DOM Section 72040.6.1 & 72040.6.2 & CR 95/01 & CR 02/06*

*“If the detainer is from a California agency for untried charges, the inmate may request disposition of pending charges by filing a CDC Form 643, Demand for Trial in accordance with the provisions of PC 1381”.*

*“Case records staff shall mail the CDC Form 643 to the DA by certified mail, return receipt requested”.*

*“PC 1381 stipulates a person must be brought to trial within 90 days after written notification of the place of confinement. The 90-day period starts the day the DA acknowledges receipt of the CDC Form 643”.*

*“If the inmate is not brought to trial at the conclusion of the 90-day period, case records staff shall prepare:*

*A CDC Form 668, Affidavit in Support of Motion to Dismiss Pending Charges.*

*A CDC Form 669, Motion to Dismiss Criminal Charges Pending.*

*A CDC Form 670, Order of Dismissal.*

*A CDC Form 1006, Cover Memo - Motion to Dismiss.*

*All of these forms shall be forwarded to the court having jurisdiction of the Matter”*

Desk Procedures for the HWD clerical staff as well as the Case Records Analyst were reviewed, and staff was interviewed. The HWD Desk Procedures need to be more thoroughly written, for the clerical as well as the Case Records Analyst, with specific directions, procedures to include samples and current Instructional/Informational Memorandums. They also need to be more specific as to which classification is responsible for performing specific functions. When speaking with staff, the majority of them responded that they were not aware of



## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

the desk procedure or some of the processes. Even though the desk procedure written as they are do have some direction, staff have not read these procedures and are not following the direction in the procedures.

Inquiries regarding potential holds are to be sent to law enforcement agencies within two (2) working days of receipt of the CDC Form 850, and Telephonic follow-up should be used at the 10-day audit (CRU 91/03).

Of the twenty eight (28) cases reviewed there were issues noted in six (6) of the cases. As the discrepancies are consistent, it appears training and guidance is needed to the appropriate staff.

The CDC 850 was prepared, however no LOI was initiated:

V61555 Dominguez

F64086 Johnson

G57399 Flores

G19404 Marentes

V14147 Green

G25700 Starosta

The lack of documentation on the CDC Form 850 to indicate when the LOI was initiated is not being put on the CDC Form 850; therefore the audit team is unable to determine compliance in this area. Also, it appears the majority of inquiries are being done telephonically regardless of the parole date.

During review of the desk procedures and talking with staff it was noted that the Letter of Inquiry being utilized is an obsolete form. This is another indication of the need to have updated desk procedures with samples, as well as Instructionals and Informationals included.

Letters of Inquiries (LOI) are to be written in accordance with departmental policy. Of the twenty eight (28) cases reviewed where a LOI was written, there were three (3) cases where an obsolete CDC 206 is being utilized. Also, there were two (2) cases where the CDC 850 reflected a LOI was initiated, however there wasn't an LOI in the file. In one (1) case there was a CDC 850 in the file, however there wasn't any indication that an LOI had been initiated.

G19404 Marentes

G25700 Starosta

G06363 Padilla

G19664 Halverson

V61555 Dominguez

G19664 Halverson

## CALIFORNIA REHABILITATION CENTER – FELON RECORDS

PC Sections 1381 and 1389, Demand for Trial, and PC Section 1203.02(a), Disposition of Probation, Waiver of Appearance, and Right to Attorney are sent return receipt certified mail.

There was one (1) case where there was no return receipt certified mail in the file. A check was done with the legal desk clerk to see if he had one for this inmate that may not have gotten in the file. This search was negative.

G19664 Halverson

Motions for Dismissal pursuant to PC Section 1381 are prepared 90 days after receipt is acknowledged by the district attorney.

This process is addressed in the desk procedure, however it is not being followed. I spoke with the staff person who is performing the duties for this process and was informed he was not aware that he needed to keep a tracking or a log to follow up with the 90 day time frame.

Dom Section 72040.5, states...*“The HWD system ensures that information regarding any specific or potential detainer is recorded and called to staff attention within four hours of receipt to determine what effect, if any, the hold might have on an inmate’s custody.”*

Of the fifty nine (59) cases reviewed there were eleven (11) cases found not in compliance. See below for specifics:

None of the Warrants received for these eleven cases were date and or time stamped pursuant to policy and procedure.

F64086 Johnson  
G36470 Davie  
H68494 Williams  
F05978 Nicholls  
V53785 Ladeford  
G19664 Halverson  
G55965 Cooper  
F49106 Castro  
J78029 Hinojosa  
G31473 Campos  
V61555 Dominguez

The CDC 850 for the above eleven (11) cases did not reflect the time that the warrant was received and the CDC 850 was not documented to indicate the time the appropriate actions were taken. Therefore the team can not verify the four (4) hour time frame was met.

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

The CDC 850 is not consistently being filled out appropriately. The boxes that indicate the CCI is notified/CDC 2143 Sent, CDC 661 Sent to inmate, CDC 661 returned from inmate, CDC 661 Sent to Agency, Date CDC 2143 Received, whether PC 1381, PC 1389, PC 1203.2a is applicable, is not being completed.

The inmate is notified of the detainer via the CDC 661 Detainer Memorandum. Of the twenty eight (28) files reviewed, there were seven (7) cases found with discrepancies. See specifics below:

In two (2) cases the inmate was not sent a CDC 661, notification that he had a detainer.

F05978 Nicholls  
J78029 Hinojosa

There were five (5) cases where the CDC 661 was incorrectly checked for the disposition the inmate is entitled to.

V61555 Dominguez  
G31473 Campos  
G19404 Marentes  
F49106 Castro  
G55965 Cooper

There was two (2) case where the CDC 661 did not give the inmate the proper option for disposition. Also, a CDC 661 was not completed on an additional warrant.

G55965 Cooper  
V61555 Dominguez

There was two (2) case where the CDC 661 does not reflect the AKA as reflected on the actual warrant placed.

G31473 Campos  
V61555 Dominguez

Also the warrant number on all of the CDC documents for inmate's listed above does not match the warrant received. The CDC 801 from when the inmate went out to court and returned is still in the C-File. The CDC 801 should have been purged upon return of the inmate.

The Detainer or Warrant is given to the agency when the inmate is picked up and a copy is retained in the Central File. This process is addressed in the desk procedure for the parole clerical staff; however in speaking with staff they are not

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

following this direction, they are maintaining the original in the Central File and giving the pickup agency a copy.

The KCHD is queried for any holds prior to the inmate's release to parole. The desk procedure for the parole desk indicates they are responsible for this process, however it is not being done.

It is required that a Timer Server Log be maintained to insure holds are deleted from the computerized systems pursuant to policy and procedure. In discussion with several of the staff to ascertain if a system was in place we were told they do not maintain a tracking for this. This process is addressed in the Case Records Analyst procedures, however in speaking with them they were not aware of this process. Therefore there is not a timeserver tracking system in place.

When holds expire or are dropped, ARDTS is updated. A listing from the Automated Release Date Tracking System (ARDTS) was requested upon arrival at the Records Office. Of that listing a random review was conducted of ninety eight (98) entries. There were numerous entries discovered in ARDTS with hold information entered, however this information was not in OBIS. There appears to be a disconnect in that when the Case Records Analyst are performing their audits they are not reviewing information in ARDTS and verifying the information with OBIS.

Also some of the warrant #'s and names in ARDTS did not match those in OBIS.

Of those entries reviewed there were twenty six (26) that were reflected in ARDTS; however there was not any warrant information in OBIS. This list will be provided to the Case Records Manager and Supervisor for their review and appropriate action.

There were eleven (11) entries reflecting the inmate had a potential ICE/USINS hold, however OBIS reflects an Actual Warrant was placed.

This list will be provided to the Case Records Manager and Supervisor for their review and action as appropriate.

### **General Findings**

In the Holds, Warrants and Detainer portion of the audit, 19 components were reviewed. There are ten (10) areas that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Staff are not utilizing the resources available.
- Staff need consistent directions for the HWD processing.
- The ARDTS Data Base needs to be reconciled with the correct information as it is used exclusively for release dates.

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

- Updated Instructional Memorandums are not being shared with staff or incorporated into their desk procedures.

### **Recommendations:**

- Review and update HWD Desk Procedures for the clerical staff to include time frames for completing each step in the process.
- Procedures for the Correctional Case Records Analyst must be updated as necessary to include detailed instructions for processing HWD.
- On the job training should be provided and documented for the Correctional Case Records Analyst for their responsibilities in the HWD process.
- OBIS HWD “KCHD” screen should be queried within 24 hours of release to work furlough, TCL or parole to verify there are no new holds for the inmate. This will help to prevent an erroneous release of an inmate with an active hold.
- Share Instructional Memorandums with all staff to ensure compliance with Departmental Policies.
- For quality assurance of the ARDTS Database it is recommended that supervisory staff conduct periodic reviews of ARDTS Database Reports to ensure the data being entered or updated is accurate.
- Provide training to appropriate staff to ensure the CDC Form 850 is being properly filled out to include, but not limited to, the date of initiation, date and time of hold placed, as well as the Evaluator Section completed.
- Provide training for the staff responsible for entering and removing warrant information into the ARDTS systems.
- Provide training for the appropriate staff that is responsible for sending out the Letter of Inquiry and documenting information on the CDC 850. Ensure this process is reflected in the desk procedure.
- Ensure documented training is provided to **all** staff who are responsible for filling out and/or completing the CDC Form 850.
- Provide training regarding the time frames between initiating the CDC 850 and forwarding the inquiry to the appropriate law enforcement agency.
- Implement a tracking system to ensure the Motion for Dismissal are processed pursuant to the policy and procedures as outlined in DOM. Ensure the certified return receipt is maintained in the Central File.
- Ensure all the requirements are met for placing a hold within the four (4) hour time frame pursuant to Departmental Policies and Procedures.
- Completing the CDC 661 with the appropriate option to the inmate, including but not limited to, PC 1381, PC 1389 and PC 1203.02(a).
- Implement a tracking system to ensure Time Server Warrants are deleted from the computerized systems pursuant to policy and procedures
- Ensure that when holds expire and/or are dropped the ARDTS is updated appropriately and the CDC 112 is posted appropriately.

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

### **WARDEN'S CHECKOUT ORDER (CDC 161)**

*Reference: DOM Section 73010.6.1*

*"... The commitment name shall be recorded as reflected on the original Abstract of Judgment /Minute Order by which the inmate was delivered to the custody of the Department."*

*Reference: DOM Section 74070.3*

*"...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday."*

*"Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden's Checkout Order, and arrange distribution as required by institution operations."*

*Reference: DOM Section 74070.21*

*"The following data shall be typed on the CDC Form 161:*

- Date of Release*
- Time of Release*
- Type of Release*
- CDC number*
- Commitment name*
- Controlling Discharge Date*
- Name of parole unit and county of residence*
- Parole Region*
- Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.*

*"The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS".*

*Reference: Instructional Memorandum (CR 01/14)*

*"...The CDC Form 161, Warden's Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement..."*

*"...the Warden's Checkout Order must include a notation above the Case Records staff's signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable."*

*Reference: Instructional Memorandum (CR 99/69), Informational Memorandum dated 5-7-1990.*

## CALIFORNIA REHABILITATION CENTER – FELON RECORDS

*“ . . . Institutions and Regions should submit early/late release reports to Case Records Services as they occur. Those Case Records Offices utilizing a Monthly Early/Late Release Log are to submit the report no later than the last working day of the reported month.”*

*“ . . . Early/Late Release Reports should be prepared at the time of discovery and forwarded to Case Records, central office within a few days”.*

In reviewing the early/late releases with the Case Records Manager, there were two late release reports that have not been forwarded to Case Records Services as of February 9, 2010.

F72069 Smith – Released late on 12/17/2009  
F36829 Hawkins – Released Late on 1/4/2010

Desk Procedures for the parole desk clerical staff were reviewed. The desk procedures for this area needs to be more detailed with samples and references provided. Even with the procedures currently in place they are not being followed with respect to providing the pick-up agencies with the original warrant at time of release. The staff person I spoke with was not aware of this policy. Documented training needs to be provided to all staff who are responsible for performing this task.

Central files were reviewed for inmates/parolees who were released from the California Rehabilitation Center Felon Records office (CRC-Felons) during the preceding two (2) weeks of this review.

There were fifty nine (59) Central Files reviewed. Significant issues surrounding individual cases will be addressed with specific facts.

In all fifty nine (59) of the CDC 161, Warden's Checkout Orders reviewed, none reflected the time of release pursuant to policy and procedures. (DOM Section 74070.21)

There was three (3) CDC 161, Warden's Checkout Order's that reflected the wrong or inaccurate parole region.

G08623 Goche was reflected as Region 3; however it should have been reflected as Region 4, pursuant to E-Mail message dated 4-1-2009 from the OBIS Unit at Headquarters.

K76900 Barker was reflected erroneously as RegionR, should have been Region 4.

F88904 Atilano was reflected as Region 3, Elmonte1, LA, however because he was being released to USINS it should have been reflected as INS3/LA.

## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

AA1853 Green, the first name was spelled incorrectly on the CDC 161, Warden's Checkout order. The name on the CDC 161 was spelled Jeffery and should have been Jeffrey.

Also there were several cases where the OBIS entry was not accurate and these cases were referred to the Case Records Manager (A) for appropriate action.

P67683 Moreno, the OBIS move did not reflect inmate was released pursuant to Penal Code (PC) Section 3060.7.

G09392 Arnold, the Controlling Discharge Date (CDD) was entered incorrectly into OBIS. It was entered as 1-2-2013, however should have been entered as 1-25-2013.

F43063 Hall, the OBIS parole move was entered incorrectly. OBIS reflected the inmate was released on 1-16-2010, however the CDC 161, Warden's Checkout Order correctly reflected 1-7-2010.

T35136 Collins had a release date of 1-4-2010. On 1-4-2010 a 45 day SVP Hold was placed by the BPH. The movement for this action was not completed in accordance with policy, in that he should have been a paper move to parole on his release date and returned same day as a Pend Rev.

During this review it was also noted that in several case(s) the Chronological History (CDC 112) is not being posted pursuant to Department Policy.

AA1853 Green, the CDD and the Discharge Review (DR) dates were not posted.

V56748 Serrano, the CDD was reflected as a three (3) year parole period, however due to the nature of the offense it requires a five (5) year parole period. The CDD was correct on the CDC 161, Warden's Checkout Order and the Legal Status Summary.

### **General Findings:**

Of the three (3) components reviewed all were found not in Compliance.

### **Recommendations:**

- On the job training should be provided and documented for the Correctional Case Records Analyst, Correctional Case Records Supervisor, or any of the staff responsible for reviewing and signing off the CDC 161 Warden's Checkout Order's.
- Provide documented training to those staff that is responsible for entering moves into OBIS, which include but not limited to parole moves.



## **CALIFORNIA REHABILITATION CENTER – FELON RECORDS**

- Periodic review by supervising staff for those staff that is responsible for data entry into OBIS, documentation of the CDC 112, and overall care of the Central File.

### **STAFF VACANCIES**

The vacancies are reported as follows:

Seven (7) Case Records Technician vacancies – interviews for these positions are scheduled for March 9-10.

Three (3) Case Records Analyst vacancies – interviews were conducted on January 27, 2010, and are currently going thru the hiring process.

One (1) Case Records Manager – Currently being advertised in VPOS

# INMATE APPEALS AUDIT

## California Rehabilitation Center

**February 8, 2010-February 12, 2010**

**Reviewer:** S. Wright, Facility Captain, Inmate Appeals Branch  
 J.L. Hill, Correctional Counselor II, Avenal State Prison  
 M.R. Correctional Counselor II, Chuckawalla Valley State Prison

### SUMMARY CHART

AREA REVIEWED		RATING	97
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	Percentage	Page No.
<b>OVERALL RATING</b>	<b>97%</b>	1
A. ACCESS TO INMATE APPEALS	<b>100%</b>	4
B. TRACKING/FILING APPEALS	<b>99%</b>	5
C. PREPARATION OF APPEALS	<b>99%</b>	6 -7
D. TIMEFRAMES	<b>92%</b>	8
E. APPEAL RESPONSES	<b>97%</b>	9
F. SPECIALIZED PROCESSING OF APPEALS	<b>100%</b>	10 - 11
G. TRAINING and OFFICE STAFFING	<b>90%</b>	12
H. OVERDUE APPEALS	<b>100%</b>	13

## **INMATE APPEALS BRANCH AUDIT INSTRUMENT**

### **GENERAL INSTRUCTIONS**

The Auditors will examine the previous year's results (if applicable) and become familiar with any previous compliance issues. Further, the auditor is responsible to meet with the institution staff during the week and inform them of any significant compliance issues. The exit briefing arrangements will be coordinated via administrative staff at the institution.

Upon arrival in the Inmate Appeals Office, the auditors will request the staff to produce the current overdue list from the automated Inmate Appeals Tracking System (IATS). The overdue rate will be calculated from the random sample of selected appeals. The percentage of compliance will be calculated from the sample of appeals and will reflect the percent of those appeals that were completed within Department time frames. In addition, the office staff will be asked to produce a modification order tracking printout and to explain the modification order procedures. The auditors will also look at the overdue appeal notification and follow-through procedures. While in the Appeals Office, the auditors will observe the overall operations of the office, including the procedures for processing the appeals from arrival to assignment and completion, to confirm that staff are following written procedures in the performance of their daily job responsibilities

A selection of approximately 100 inmate appeal files (when feasible – if not, select an even number of files, i.e., 80 or 90) will be selected by the auditors or the Appeals Coordinator to ensure a variety of categories and level of responses are chosen. A breakdown of the number of files in different categories will be as follows:

20 Disciplinary Appeals (or 20% of total files selected)

15 Americans With Disabilities Act (ADA) Appeals (or 10% of total files selected)

25 Staff Complaint Appeals (or 25% of total files selected)

40 Random Categories (transfers, custody classification, property, living conditions, program, 5 group appeals, 5 multiple appeals) or 40% of total files selected)

Appeals will only be selected that originated at this institution. Staff will be asked to provide a printout to include the appeal files selected by the auditors, to compare the IATS dates with the dates on the appeal. The auditors shall ensure appeal files are complete and have all supplemental documents referred to in the file. Timeframe requirements will be reviewed for compliance. Appeals will also be reviewed to ensure responses to the appellant include the appeal issue and reasons for the appeal decision.

The auditors will arrange with the Appeals Coordinator to inspect the institutional libraries, general housing units, and special housing units to ensure that the appropriate forms and reference materials are available to the inmate population (CDC Form 602s, CDC Form 1824s, CCR, DOM). While visiting the housing units, be sure to inquire regarding inmate orientation. The Inmate Appeals Process must be provided to the inmates in written and verbal form. The auditors will observe the housing unit appeal procedures while

## Inmate Appeals Branch Audit Instrument

researching the availability of forms in the facilities. The auditors will also interview staff and approximately 10 inmates to inquire as to the appeals process and its effectiveness.

The In-Service Training program will be reviewed to determine if there is an updated lesson plan and regularly scheduled appeals training.

Audit ratings consist of eight different areas. Each area has identified questions that determine compliance ratings. Specific questions are rated by two different methods as follows:

1. By counting the number of specific items and determining the percent of compliance (i.e., # 50 # OK 42 = 84% [42 divided by 50]).
2. If the question is a yes/no question, it is rated either 100% if yes or 0% if no.

Each question has been assigned a numerical rating. The numerical value for each section will total 100 with this value divided between the area's questions. The compliance rating for each area is calculated by multiplying each question's compliance percentage by the numerical priority value. The adjusted compliance points for each question are then totaled to arrive at an overall point total for each area. Once all eight areas are totaled, they are divided by eight to arrive at an overall audit rating for the institution. The auditors will complete a final report and an executive summary prior to the scheduled exit with the Warden and management team. Specifics for the number of executive summary copies and time of the exit will be determined by administrative staff.

## California Rehabilitation Center February 8, 2010-February 12, 2010

The findings in this Inmate Appeals Compliance Review resulted in an overall score of 97%. All areas are listed below with applicable notations.

It should be noted that staff interviewed were knowledgeable, familiar with the established departmental and institutional policies and procedures, relative to the appeals process: Correctional Counselor II T. Lakin and T. Hanger; Associate Government Program Analyst were able to locate documents needed for the Review and provide information in a timely manner. It was indeed a pleasure to work with the current CRC Appeals Office staff.

The specific sections and their corresponding questions and scores are identified below.

Copies of the Inmate Appeals Worksheets are available upon request.

## A. ACCESS TO THE APPEALS PROCESS

### OBJECTIVE:

Determine the availability and access of the CDC Appeals Forms to the general population and special housing inmates. Determine if the Appeals Process is presented to the orientation inmates both in written and verbal form.

### SECTION METHODOLOGY:

*The Auditors will inspect the institution's law libraries and all housing units to ensure that the CDC Appeals Forms are easily available to the respective inmate population. Review the inmate orientation information to ascertain if it speaks to the Inmate Appeals process. Is the Appeals Process presented to the orientation inmates both in written and verbal form?*

- 1) **Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate?** [CCR 3084.1 (c)]

\_\_43\_\_ sample # \_\_43\_\_ # correct = \_\_100\_\_%

Question Rating: **40**

- 2) **Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and any facility appeal supplement in each inmate law library?** [DOM Section 101120.11, 54100.3]

\_\_2\_\_ sample # \_\_2\_\_ # correct = \_\_100\_\_%

Question Rating: **10**

- 3) **Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures?** [CCR 3002(a)(2)]

Yes Question Rating: **20**

- 4) **Does the institution provide the orientation inmates verbal staff instruction regarding the inmate's right to appeal and appeal procedures?** [CCR 3002(a)(2)]

Yes Question Rating: **20**

- 5) **Does the Institution provide appropriate assistance necessary to ensure that inmates that have difficulty communicating in written English have access to the appeals process?** [CCR 3084.3(b)(3), DOM 54100.3]

Yes Question Rating: **10**

- 6) **\*\*Does the institution provide the CDC Form 602 in Spanish?**

Yes Question Rating: **0**

SECTION POINT TOTAL **100**

\*\* This question is for information gathering only.

## B. TRACKING AND FILING APPEALS

### OBJECTIVE:

To ensure proper tracking and complete filing of appeals.

### SECTION METHODOLOGY:

*The Auditors will interview all Appeals Staff to discuss their tracking system for all appeals including Modification orders. When reviewing the files, the auditors must look to ensure the appeals are copied on both sides and all supplemental documents are attached (i.e., second level response, first level response, RVR). The auditors will review the procedure for tracking overdue appeals. The auditors will make note of 10 appeals (preferably including first and second level responses) and pull those same central files to ensure the appeals have been filed in the central file.*

**1) Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels?**

[DOM Section 54100.9]

Yes Question Rating **15**

**2) A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached?** [DOM Section 54100.3]

\_\_\_100\_\_\_ sample # \_\_\_100\_\_\_ # correct = \_\_\_100\_\_\_ % Question Rating: **20**

**3) Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days?** [CCR 3084.5(i)]

\_\_\_30\_\_\_ sample # \_\_\_28\_\_\_ # correct = \_\_\_93\_\_\_ % Question Rating: **19**

Some modification orders were not completed within 90 days.

**4) Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?** [CCR 3084.6, DOM 54100.12]

Yes Question Rating **20**

**5) CDC Form 602. After completing the first level review, the CDC Form 602, with the reviewer's decision, shall be returned to the appeals coordinator to be closed in IATS, a central file copy and appeals coordinator's copy made, and the original returned to the inmate. The central file copy shall be forwarded to the case records office for filing. This process shall be repeated at the second level review. Is this being done?** [DOM 54100.26]

Yes Question Rating **10**

**6) Review Central File: the Auditors shall review 20 central files to ensure the appeals (institution level and Director's level) are being filed.**

\_\_\_20\_\_\_ sample # \_\_\_20\_\_\_ # correct = \_\_\_100\_\_\_ % Question Rating: **15**

SECTION POINT TOTAL: **100**

**C. PREPARATION OF APPEALS**

**OBJECTIVE:**

To ensure the appeals are being prepared appropriately pursuant to regulation. The information for these questions is gathered from the worksheets and staff interviews.

**SECTION METHODOLOGY:**

*The Auditors will need to interview the Appeals Coordinator and Appeals Staff regarding their duties and responsibilities. The Auditors will need to inspect the overdue lists for first and second level appeals and the automated Inmate Appeals Tracking System (IATS). They will review the appeals for the inmate interview requirement, dates corresponding with the IATS, all dates and signatures on the Appeal, and the warden's review. The auditors will also review CDC 695 Forms (screen outs) and Notice of Delay forms.*

**1) Appeals Coordinator.** Each institution head shall designate an Appeals Coordinator, at a staff position level no less than Correctional Counselor II, who shall, prior to acceptance for review, screen and categorize each appeal originating in their area for compliance with these regulations, and shall coordinate the processing of appeals. Are these duties being performed by the Appeals Coordinator? [CCR 3084.3, DOM 54100.3].

Yes Question Rating **10**

**2) Screening Appeals:** The appeals coordinator or a delegated staff member shall screen all appeals prior to acceptance and assignment for review. When it is determined that an appeal will not be accepted for review, an appeals screening CDC Form 695 shall be completed, attached to the CDC Form 602 and returned to the inmate or parolee. Clear instructions regarding further action the inmate must take to qualify the appeal for processing shall be provided. Is this procedure being completed? [CCR 3084.3, DOM 54100.8.1]

\_\_\_\_\_100\_\_\_\_\_sample #\_\_\_\_\_100\_\_\_\_\_# correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **15**

**3) Notification of delay.** If exceptional delay prevents completion of the review within specified time limits, is the appellant being informed in writing of the reasons for the delay and the estimated completion date? [CCR 3084.6(b)(6)]

\_\_\_\_\_7\_\_\_\_\_sample #\_\_\_\_\_7\_\_\_\_\_# correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **10**

**4) Are inmates interviewed at the first level of review or at second level if first level is waived?** [CCR 3084.5 (f) and DOM 54100.14]

\_\_\_\_\_100\_\_\_\_\_sample #\_\_\_\_\_97\_\_\_\_\_# correct = \_\_\_\_\_97\_\_\_\_\_ % Question Rating: **15**

Inmate Appeals Branch Audit Instrument

**5) Do the dates on the appeal correspond with the dates on the IATS?**

[DOM Section 54100.9]

\_\_\_\_\_100\_\_\_\_\_sample #\_\_\_\_\_89\_\_\_\_\_# correct = \_\_\_\_\_89\_\_\_\_\_ % Question Rating: **9**  
Some due dates, received dates, and completed dates, did not match IATS.

**6) A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)?** [DOM Section 54100.3]

\_\_\_\_\_100\_\_\_\_\_sample #\_\_\_\_\_95\_\_\_\_\_# correct = \_\_\_\_\_95\_\_\_\_\_ % Question Rating: **10**

**7) Is there evidence that appeal decisions are reviewed by the institution head or his/her designee?** [CCR 3084.5(e)(1)]

\_\_\_\_\_49\_\_\_\_\_sample #\_\_\_\_\_49\_\_\_\_\_# correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **10**

**8) Multiple Appeals on similar issue.** In cases where a number of inmates have, independently of each other, filed appeals regarding similar policies or institutional regulations at the same time, the original appellant and one or more of the inmates concerned shall be interviewed in order to clarify the issue, and a response given to the inmate who filed the initial appeal. Copies of the decision shall be sent to the other inmates who filed appeals simultaneously regarding the same issue, which shall constitute a completed appeal action. All such appeals shall be logged. The original inmate's name and prison number shall be removed from the appeal response given to the other inmates. Is the institution following this procedure? [CCR 3084.2(g), DOM 54100.10]

\_\_\_\_\_10\_\_\_\_\_sample #\_\_\_\_\_10\_\_\_\_\_# correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **10**

**9) Group Appeals.** Occasionally a group of inmates, usually living in one housing unit or participating in one program area, decide to appeal a specific issue which affects all group members (group appeals). One CDC Form 602 shall be accepted, with the name of the inmate who prepared the appeal entered on the top of the form. A list of inmate signatures, with facility numbers and unit numbers, shall then be attached. Sufficient interviews (one or more) shall be held to clarify the issue under appeal. At each level of review, a response shall be attached to the CDC Form 602 and returned to the initiator who shall then share the response with all inmates who signed the appeal attachment. This appeal shall be logged as one appeal. Is the institution following this procedure? [CCR 3084.2(f), DOM 54100.10.1]

\_\_\_\_\_3\_\_\_\_\_sample #\_\_\_\_\_3\_\_\_\_\_# correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **10**

SECTION POINT TOTAL **99**



## D. TIMEFRAMES

### OBJECTIVE:

To ensure the appeals are being prepared within Department timeframes.

### SECTION METHODOLOGY:

*The Auditors will need to review the random samples of inmate appeals for time frames, appropriate responses, and proper processing at each level.*

**1) Are appeals being assigned at each level within five working days of receipt in the Appeals Office?**

[DOM 54100.9]

\_\_\_\_\_100\_\_\_ sample # \_\_\_\_\_97\_\_\_\_\_ # correct = \_\_\_\_\_97\_\_\_% Question Rating: **24**  
Some appeals were not assigned within five working days. Specifically, in the categories of ADA, Disciplinary and Case Info/Records.

**2) Are informal appeals completed within ten working days?**

[CCR 3084.6 (b)(1)]

\_\_\_\_\_32\_\_\_ sample # \_\_\_\_\_30\_\_\_\_\_ # correct = \_\_\_\_\_94\_\_\_% Question Rating: **23**  
Informal Appeals are not being accepted at the lowest level for response. This is creating the violation of time frames.

**3) Are first-level responses completed within 30 working days?**

[CCR 3084.6 (b)(2)]

\_\_\_\_\_79\_\_\_ sample # \_\_\_\_\_66\_\_\_\_\_ # correct = \_\_\_\_\_84\_\_\_% Question Rating: **21**  
Some First Level Appeals are not being completed within 30 working days. Some First Level Staff Complaint Appeals are not being completed within 30 working days. This seems to be due to the hiring authority not completing their level of review within their time constraints causing a delay in the response.

**4) Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)? [CCR 3084.6 (b)(3)]**

\_\_\_\_\_49\_\_\_ sample # \_\_\_\_\_46\_\_\_\_\_ # correct = \_\_\_\_\_94\_\_\_% Question Rating: **24**  
Some Second Level Staff Complaint Appeals are not being completed within 30 working days. This seems to be due to the hiring authority not completing their level of review within their time constraints causing a delay in the response.

SECTION POINT TOTAL **92**

## E. APPEAL RESPONSES

### OBJECTIVE:

To ensure the appeals are being responded to according to CCR and DOM. The information for these questions is gathered from the worksheets.

### SECTION METHODOLOGY:

*The Auditors will review 40 random category appeals and 15 ADA appeals to ensure the appeal issue is restated at each level and the reason for the decision is provided to the appellant.*

#### 1) Does the institution prepare a written response at the first level of review stating the appeal issue?

[CCR 3084.5 (g) and DOM 54100.15]

\_\_\_\_\_79\_\_\_\_\_ sample # \_\_\_\_\_71\_\_\_\_\_ # correct = \_\_\_\_\_90\_\_\_\_\_ % Question Rating: **22**  
Some appeals did not restate the appeal issue as required at the first level of review. Specifically, Case Records, Trust, Living Conditions, and Mail.

#### 2) Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered?

[CCR 3084.5 (g) and DOM 54100.15]

\_\_\_\_\_79\_\_\_\_\_ sample # \_\_\_\_\_78\_\_\_\_\_ # correct = \_\_\_\_\_99\_\_\_\_\_ % Question Rating: **25**

#### 3) Does the institution prepare a written response at the second level of review stating the appeal issue?

[CCR 3084.5 (g) and DOM 54100.15]

\_\_\_\_\_49\_\_\_\_\_ sample # \_\_\_\_\_49\_\_\_\_\_ # correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **25**

#### 4) Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?

[CCR 3084.5 (g) and DOM 54100.15]

\_\_\_\_\_49\_\_\_\_\_ sample # \_\_\_\_\_49\_\_\_\_\_ # correct = \_\_\_\_\_100\_\_\_\_\_ % Question Rating: **25**

SECTION POINT TOTAL **97**

**F. SPECIALIZED PROCESSING OF APPEALS**

STAFF COMPLAINTS  
APPEAL RESTRICTION  
EMERGENCY APPEALS  
REPORTING TO HEADQUARTERS

**OBJECTIVE:**

To ensure that the statutory and regulatory provisions for the filing of staff complaints, CDC Form 1824s, and appeal restrictions are being met.

**SECTION METHODOLOGY:**

*Randomly inspect the above listed appeals and forms to ensure that they are processed and responded to accordingly.*

**STAFF COMPLAINTS**

**1) When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations; DOM 54100.25.2)**

Yes Question Rating: 10

**2) Is the institution keeping Staff Complaints for a period of five years? [DOM 54100.25.5 and Penal Code 832.5(b)]**

Yes Question Rating: 10

**3) If a Staff Complaint appeal is canceled or withdrawn, is a copy of the complaint forwarded to the hiring authority so that a determination is still made as to the need for an investigation?**

Yes Question Rating: 10

**4) Are all allegations of staff misconduct referred to the hiring authority for appropriate review? [AB 05/03]**

Yes Question Rating: 10

**5) Are all allegations of staff misconduct presented to the warden or designee at least weekly? [AB 05/03]**

Yes Question Rating: 20

Inmate Appeals Branch Audit Instrument

*APPEAL RESTRICTION*

**6) Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction? [CCR 3084.4(3), (4)]**

Yes

Question Rating: **10**

**As no inmates have been placed on restriction**

*EMERGENCY APPEALS*

**7) Informal/First Level Bypass. If emergency processing is warranted, the first level shall be waived and the second level shall be completed within five working days of receipt. Is this process being done? [CCR 3084.7(a)(2)(B), DOM 54100.17]**

Yes

Question Rating: **10**

**8) Are requests for Director's Level on Emergency Appeals being scanned or faxed to Chief, Inmate Appeals? [CCR 3084.7(a)(2)(C), DOM 54100.17]**

Yes

Question Rating: **10**

*REPORTING:*

**9) Has the hiring authority submitted a quarterly summation of the total number of staff complaints received, delineating the numbers by the levels of investigations to which they were referred?**

Yes

Question Rating: **5**

**10) Each Warden shall prepare an annual report between January 1 and January 15 of staff complaints against peace officers. This report shall be submitted to the Chief, Inmate Appeals Branch. [DOM 54100.25.6]**

Inmate Appeals Annual Report was completed January 8, 2010.

Yes

Question Rating: **5**

SECTION POINT TOTAL **100**

## **G. TRAINING/OFFICE STAFFING**

### **OBJECTIVE:**

The focus of this area is Inmate Appeals training and inmates working in the Appeals Office.

### **SECTION METHODOLOGY:**

Meet with In-Service Training (IST) staff to discuss their training schedule and review the Inmate Appeals Lesson Plan. Discuss the involvement of the Inmate Appeals Coordinator with IST. While in the Appeals Office, verify as to whether or not an inmate works in the office and what his/her duties are.

### **SPECIFIC AREAS OF REVIEW:**

- 1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out?**  
[DOM 54100.3]

There was no evidence of previous coordination between the CRC Appeals Office and the In service Training Department. However there is now monthly dialogue to ensure review of the training schedule and update of the Inmate Appeal Lesson Plan for all appropriate staff.

Yes                      Question Rating: **10**

- 2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation?** [DOM 32010.10.2]

Yes                      Question Rating: **30**

- 3. Is there an updated Inmate Appeals lesson plan which identifies current Department policy?** [DOM 32010.8.4, 54100.3]

Yes                      Question Rating: **30**

- 4. If inmates work around the Appeals Office, are they prevented from having access to appeal information?** [CCR Sections 3370(b) ]

No inmates work in the Inmates Appeals Office.

Yes                      Question Rating: **20**

**SECTION POINT TOTAL              90**

## H. OVERDUE APPEALS

### OBJECTIVE:

To track and count the overdue appeals.

### SECTION METHODOLOGY:

*The Auditors will review the current overdue printout to count number of overdue appeals and deduct applicable points.*

- 1) **What is the number of overdue First Level appeals and by how many days late?**

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Times # of appeals)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

Question Rating: 50  
Points deducted: 0  
Question Rating Total: 50

- 2) **What is the number of overdue Second Level appeals and by how many days late?**

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Times # of appeals)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

Question Rating: 50  
Points deducted: 0  
Question Rating Total: 50

### APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):

# of Days late	Number of Appeals	Pts	Point Deduction (Times # of appeals)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

# of Appeals: 0 Points Deducted: 0 **Score:**

SECTION POINT TOTAL **100**

## Inmate Appeals Branch Audit Instrument

**ADDITIONAL AREAS OF REVIEW:** This portion of the audit tool has been added in September 2006. These areas of the institution will be reviewed for information gathering; however, scores will not be obtained.

### **1. Law Library access for SHU and ASU inmates:**

- a)** What is the process for allowing SHU and ASU inmates access to the law library?  
[CCR 3122, 3160, 3164, 3343(k)]

Inmates are escorted to the Law Library on their scheduled days by staff, and paging services are also available.

- B)** How often do these inmates have access to the law library?  
Inmates receive access to the law library once a week.

- b)** How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates?

Inmates with PLU have priority access to the law library.

## **Inmate Law Library CCR Sections**

**CCR 3122: Inmate Law Library:** (a) Each facility shall provide legal materials through its law library to provide inmates with meaningful access to the courts. Inmates with established court deadlines shall be given higher priority to access law library resources than those with longer deadlines or without a deadline.

(b) An inmate in a facility without a law library and requesting access to such resources shall be transferred to a facility with a law library of departmental choosing for the period of time needed to complete legal work.

**CCR 3160: Inmate Access to the Courts:** (a) Inmate access to courts shall not be obstructed. Staff shall assist illiterate inmates or those physically incapable of preparing forms adopted under rules of the United States courts and the Judicial Council of California for petitions for habeas corpus or modification of custody if such an inmate requests assistance. Staff shall not in any way retaliate against or discipline any inmate for initiating or maintaining a lawsuit.

### **CCR 3164: Administrative Segregation**

(a) Inmates confined in administrative segregation for any reasons will not be limited in their access to the courts.

(b) During a period of disciplinary detention, as described in Section 3330, legal resources may be limited to pencil and paper which will be provided upon request for correspondence with an attorney or the preparation of legal documents for the courts. Other legal material in the inmate's personal property may be issued to an inmate in disciplinary detention if litigation was in progress before the inmate's placement in disciplinary detention and legal due dates are imminent.

(c) Inmates who are housed in any restricted unit and who are not serving a period of disciplinary detention may possess and have access to any legal resource material available to the general population and may assist each other in their legal work to the extent compatible with institution security. For the purpose of this subsection, restricted units include reception centers, institution reception or orientation units, controlled housing and security housing units.

(d) If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available law library material to the inmate's quarters.

**CCR 3343: Conditions of Seg Housing:** (k) Institution Programs and Services. Inmates assigned to segregated housing units will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance and recreation.